07291999-90011-005-$150.00-$150.00

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Secretary of State

07-29-1999 90011 005 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P95000034394

1. Corporation Name
B.J. EXPORT/IMPORT, INC

Principal Place of Business
13777 NW 22TH STREET
SUNRISE FL 33323

Mailing Address

607023 - 90016 - 6

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/03/1995

4. FEI Number: 59-3312672 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
13777 NW 22TH STREET	26 13777 NW 22TH STREET
Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
City & State: SUNRISE	28 City & State: SUNRISE FL
Zip: FL — Country: 25 33323	29 Zip: 33323 — Country: 30

9. Name and Address of Current Registered Agent

~~B.J. EXPORT/IMPORT, INC~~
~~13777 NW 22TH STREET~~
~~SUNRISE FL 33323~~

10. Name and Address of New Registered Agent

81 Name: NEUZA CESAR
82 Street Address (P.O. Box Number is Not Acceptable): 7225 N.W. 25TH STREET
83 SUITE 306
84 City: MIAMI FL 85 Zip Code: 33829

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: X [signature] LIDIA BEC JUNG — 07/14/99
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	☐ DELETE
NAME	BEC, DANIEZ	
STREET ADDRESS	11708 MONTE LEON WAY	
CITY-ST-ZIP	NORTHRIDGE CA 31326	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X [signature] LIDIA BEC JUNG 07/14/99 (954)858-1975
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #