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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 POCUMENT # P95000037885 (7)

FILED Jan 16 1997 8:00am Secretary of State

AMERICAN IMPORT & EXPORT CORP. Principal Place of Business Mailing Address 6216 S.W. 14TH ST. MIAMI FL 33144 MIAMI FL 33144-5606								
					3. Date Incorporated or Qualified 05/12/1995		ate of Last R 01/1996	eport
	ace of Business	2a. Mailing Address			4. FEI Number			plied For
21	- Al-	26 Cuita And H ada			65-0583059			t Applicable
Suite, Apt	#, etc	Suite, Apt. #. etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	€	City & State			6. Election Campaign Financing		\$5.00	
23		28	1		Trust Fund Contribution		Added	to Fees
Zip 24	Country	Zip	Countr 30	у	 This corporation has liability for Florida Statutes 	r intangible Yes		. 199.032,
£4	25 9. Name and Address of Curr	29 rent Registered Agent	1301		10. Name and Address of New F			
CAE	BRERA, ERNESTO		81	Name		· · · · · · · · · · · · · · · · · · ·	 	
621	8 S.W. 14TH ST.		82	Street Add	ress (P.O. Box Number is Not Accept	able)		
MA	MI FL 33144		83					
			83					
			84	City	······································	FL	85 Zip	Code
agent. La	ин тапшаг wiot, ало ассерстие оо	ligations of, Section 607.0505, F	lorida Statute	8.	poration submits this statement for the tion's board of directors. I hereby acc			
agent. I a SIGNATURE	Signature ryport or printed name of registered				ired when renstating) ADDITIONS/CHANGES TO OFF	DATE		
SIGNATURE	Signature Sport to punted name of regularity OFFICERS #	agent and title of sophuable (NC	TE: Registered Ac		ired when reinstating)	DATE		RS IN 12
SIGNATURE 12. THE NAME	Signature sport to punific hank of regeleration of FFICERS A PVST CABRERA, ERNESTO	agert and title of applicable (NC AND DIRECTORS	TE: Registered Ag 13. 11 Titl. 12 NAM	jent signature requi	ired when reinstating)	DATE	D DIRECTOR	RS IN 12
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4. I do 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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, the I am an officer or director of the corporation or the receiver or truster employeed 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/97

Daytime Phone # 0200389