

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91336 043 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000038901

1. Entity Name

A-Z IMPORT EXPORT CORP.

Principal Place of Business

Mailing Address

**C/O AMERICAN FREIGHT
7307 NW 79TH TERR
MIAMI FL 33166
US**

**C/O A A CRESPO & CO
9260 SW 72ND ST #117D
MIAMI FL 33166
US**

00054008

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0584266**

Registered

Not Applicable

5. Certificate of State Taxes

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (if City, State Number is Not Applicable)

City

FL

Zip Code

**CRESPO, ALEJANDRO A
9260 SW 72ND ST
#117
MIAMI FL 33173**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of the person or persons authorized to execute this statement

Signature of the person or persons authorized to execute this statement

Signature

9. This corporation is eligible to qualify as a corporation for filing requirements and elects to do so.
(See instructions back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign (Relating to a Political Campaign)

\$5.00 May be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If Any)

TITLE **PD**
NAME **MORENO, JOSE**
STREET ADDRESS **9551 FONTEINBLEU BLVD BLDG 9APT 314**
CITY, ST, ZIP **MIAMI FL 33172**

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

☐ Change ☐ Add or

TITLE **SD**
NAME **MORENO, ESPERANZA**
STREET ADDRESS **9551 FONTEINBLEU BLVD BLDG 9 APT 314**
CITY, ST, ZIP **MIAMI FL 33172**

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption under Section 19.07(2)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate, and that my signature, when made, shall serve as proof of the filing of this report or supplemental report of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes and nothing in this statement shall be construed to be changed or on an attachment with an address with all other like provisions.

SIGNATURE: **X** *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/01

CR25064-110-001