## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000042359 (6)

AMERICAN QUALITY EXPORTS, INC.

Principal Place of Business

Mailing Address

## FILED Jan 20 1998 8:00am Secretary of State



915 MIDDLE RIVER DRIVE. SUITE 501 915 MIDDLE RIVER DRIVE, SUITE 501 FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33304 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/01/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0488042 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired ГΠ 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes ☐ No 24 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BALANOFF, WILLIAM L DDS 915 MIDDLE RIVER DRIVE, SUITE 501 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33304 83 84 City Zip Code 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE 1.1 THLE Change Addition TITLE BALANOFF, WILLIAM L DDS 1.2 NAME NAME 915 MIDDLE RIVER DRIVE, SUITE 501 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33304 1.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2 1 1IILE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIF 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TOLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CHY-ST-ZIP DELETE Change Addition TITLE A.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change 5.1 DILE Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CHY-ST-ZIP

14. Thereby 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 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 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 exemption of the receiver of rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if of anged, or one an atjachment with an address.

95 TAN 98

GC4-568.9991