

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90067 022 ***150.00

DOCUMENT # P95000066096

1. Corporation Name

BERING & BIERHALS IMPORT/EXPORT, INC.



Principal Place of Business

12864 W. BISCAYNE BLVD.
NORTH MIAMI FL 33181
US

Mailing Address

12864 W. BISCAYNE BLVD.
NORTH MIAMI FL 33181
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1995

4. FEI Number

65-0605331

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 12864 BISCAYNE BLVD.

Suite, Apt. #, etc.

22 # 117

City & State

23 NORTH MIAMI, FL

Zip

24 33181

Country

25 U.S.

2a. Mailing Address

26 12864 BISCAYNE BLVD.

Suite, Apt. #, etc.

27 # 117

City & State

28 NORTH MIAMI, FL

Zip

29 33181

Country

30 U.S.

9. Name and Address of Current Registered Agent

BERING, ROBERTO

12864 W BISCAYNE BLVD

SUITE 117

NORTH MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

BERING, ROBERTO

82 Street Address (P.O. Box Number is Not Acceptable)

12864 BISCAYNE BLVD.

83 SUITE # 117

84 City

NORTH MIAMI

FL

85 Zip

33181

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

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 P ☐ DELETE

NAME BERING, ROBERTO

STREET ADDRESS 12864 W BISCAYNE BLVD #117

CITY-ST-ZIP NORTH MIAMI FL 33181

TITLE VP ☐ DELETE

NAME BERING, GRACE

STREET ADDRESS 12864 W BISCAYNE BLVD #117

CITY-ST-ZIP NORTH MIAMI FL 33181

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 P ☐ Change ☐ Addition

1.2 NAME BERING, ROBERTO

1.3 STREET ADDRESS 12864 BISCAYNE BLVD #117

1.4 CITY-ST-ZIP NORTH MIAMI, FL 33181

2.1 TITLE VP ☐ Change ☐ Addition

2.2 NAME BERING, GRACE

2.3 STREET ADDRESS 12864 BISCAYNE BLVD #117

2.4 CITY-ST-ZIP NORTH MIAMI, FL 33181

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APR 15, 1999 (305) 895-0712

0261379

CR2E034 (11/98)