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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 07 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000071078 (6)

ARGIZ IMPORTS, INC.

Principal Place of Business

**SIGNATURE:** 

-2051-DOUGLAS -SUITE-1110. MIAMI FL 33145		2351 DOUGLAS RD SUITE 1110 MIAMI FL 33145-3061			3. Date Incorporated or Qualified	Sa. Date of Last Re	eport	
					09/14/1995	07/23/1996		
	ace of Business (ANE CONCOURSE	2a. Mailing Address 26 9769 NW 29 TELL			4. FEI Number 65-0607096	<del>}</del>	plied For t Applicable	
Suite, Apt.	Y	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	HARBOR ISLANDS	City & State	/		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24 331	Country	Zip 22 (7)	Country		· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Curren	l Registered Agent			10. Name and Address of New Re	gistered Agent		
	ERICO M. MACIA, P.A.		81	Name				
848 BRICKELL AVE. Suite 601				Street	Address (P.O. Box Number is Not Acceptate	ole)		
MAIM	WI FL 33131		83					
			84	City		85 Zip (	Code	
44 5	to the manufacture of 0 - 10 - 1007 050	0 and 007 (500 5)-34- 065	1 1 1 1	. nor!	corporation submits this statement for the p	FL   s   zp	a unninteres	
office or re		of Florida, Such change was au	thorized by	the corr	corporation submits this statement for the population's board of directors. I hereby accept			
SIGNATURE	Signature: (youd or printed name of registered age	a sed tilla if analoska (NOTE	Rugistered Age	nt eignahire	required when reinstating)	DATE		
12.	OFFICERS ANI				ADDITIONS/CHANGES TO OFFIC		IS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	A ADEA DOUGLAS DO CUITE 4446					•		
STREET ADDRESS				ADDRESS	9769 NW 29 TERR			
CITY-ST-ZIP	MIAMI-FL: 99145+		1.4 CITY-S	T-ZIP	MIAMI FI 33172			
TITLE	D	DELETE	2.1 TITLE	*.*		Change	Addition	
NAME	ARGIZ, MARIA DEL CARM		2.2 NAME					
STREET ADDRESS	% 2351 DOUGLAS RD. SUITE	<del>111</del> 0	2.3 STREET ADDRESS		9769 NW 29 TERK MIAMI EJ 33172			
CITY - ST - ZIP	MIAMI FL 33145		2. 4 CITY - 9	IT-ZIP	MIAMI E1 33172	'		
TITLE		DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS				ADDRESS				
CITY - ST - ZIP	□ NULTIT		3.4. CITY - S	T-21P		[ ] ( )	Notables	
TITLE			4.1 TITLE			Change	Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET					
CITY - ST - ZIP TITLE	DELETE		4.4 CHTY - S 5.1 TITLE	I-ZIP		Change	Addition	
NAME		ے میداد				First Outdings		
STREET ACCIRESS			5.2 NAME 5.3 STREET	PPROGRA				
CITY-ST-ZIP			5.4 CITY - S			•		
TI'LE	DELETE		6.1 TITLE			☐ Change	Addition	
NAME			6.2 NAME			-		
STREET ACORESS			63 STREET	ADDRESS				
CITY - ST - ZIP	<i></i>			Y-ZIP				
14 Ldo borob	by certify that the information supplied	d with this filing does not qualify	for the eve	motion e	tated in Section 119.07(3)(i), Florida Statute	s. I further certify that	the	
iniormatio lani an ol appears i	in indicated on this annual report of s flicer or director of the corporation of in Block 12 or Block 13 if charteed.	the received state empower than address with an address	ie and accu red to exec ess.	ute this i	that my signature shall have the same legi report as required by Chapter 607, Florida S	in ellect as it made un Statutes; and that my r	uer vain; inat name	