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

PROFIT GORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000072820 (0)

COMMINT IMPORT EXPORT, INC. Principal Place of Business Mailing Address 13461 S.W. 178TH ST. C/O ERNESTO SANCHEZ P.A. MIAM! FL 33177 814 PONCE DE LEON BLVD. SUITE 505 CORAL GABLES FL 33134 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1995 4. FEI Number 2. Principal Place of Business 2s. Mailing Address Applied For 65-0620232 21 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Z<sub>P</sub>ρ Zip Country 8. This corporation owes or has paid the current year Intangible Yes ₩ No Personal Property Tax due June 30. 24 25 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SANCHEZ, ERNESTO PA 814 PONCE DE LEON BLVD. Street Address (P.O. Box Number is Not Acceptable) SUITE 505 83 **CORAL GABLES FL 33134** 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 of 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 (NOTE: Registered Agent signature required when reinstating) Signature, typied or printed harse of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE VSD Addition 1 1 TITLE Change TITLE DE MORAES, RODOLFO G 12 NAME NAME 150 VIRGILLO TAVORA AVE. STREET ADDRESS 1.3 STREET ADDRESS FORTALEZA, CEARA, BRAZIL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE DE MORAES, JOAO K NAME 2.2 NAME 150 VIRGILLO TAVORA AVE. STREET ADDRESS 2.3 STREET ADDRESS FORTALEZA, CEARA, BRAZIL 2.4 CITY-ST-ZIP CITY - ST - ZIP MI DELETE Addition Change TITLE 3.1 TITLE MCGEE, JOHN W NAME 3 2 NAME 801 BRICKELL AVE. STE 911 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33131 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-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 supply frontal acrual 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 of the received 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 a final action with an address.

SIGNATURE:

4/1/98 (305)441-2040

**FILED** 

Apr 27 1998 8:00am

Secretary of State