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FILED

Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000079350 (1)

1. Corporation Name
SELECT IMPORTS, INC.



Principal Place of Business
~~8000 SOUTH DIXIE HIGHWAY~~
~~SUITE 200~~
~~MIAMI FL 33133~~

Mailing Address
~~8000 SOUTH DIXIE HIGHWAY~~
~~SUITE 200~~
~~MIAMI FL 33133-2475~~

2. Principal Place of Business
21 8430 SW 98 Street

Suite, Apt. #, etc.

22 City & State
23 Miami, FL 33176

24 Zip 33176 25 Country USA

2a. Mailing Address
26 8430 SW 98 Street

Suite, Apt. #, etc.

27 City & State
28 Miami, FL 33176

29 Zip 33176 30 Country USA

3. Date Incorporated or Qualified
10/16/1995

3a. Date of Last Report
07/23/1996

4. FEI Number
APPLIED FOR 650685129

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARVESU, MANUEL M
2000 SOUTH DIXIE HIGHWAY
SUITE 200
MIAMI FL 33133

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
100 S.E. 2nd Street

83 Suite 3700

84 City Miami

85 Zip Code FL 33131

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.

4/28/97

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 ☐ DELETE

NAME PD
STREET ADDRESS DE ANGELIS, PASQUALE
CITY-ST-ZIP % 2000 S. DIXIE HIGHWAY SUITE 200
MIAMI FL 33133

TITLE ☐ DELETE

NAME VD
STREET ADDRESS DE ANGELIS, LEONARDO
CITY-ST-ZIP % 2000 S. DIXIE HIGHWAY SUITE 200
MIAMI FL 33133

TITLE ☐ DELETE

NAME SD
STREET ADDRESS DE ANGELIS, ADELINA M
CITY-ST-ZIP % 2000 S. DIXIE HIGHWAY SUITE 200
MIAMI FL 33133

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 ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 8430 SW 98 Street
1.4 CITY-ST-ZIP Miami, FL 33176

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 8430 SW 98 Street
2.4 CITY-ST-ZIP Miami, FL 33176

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS 8430 SW 98 Street
3.4 CITY-ST-ZIP Miami, FL 33176

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 do 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.

SIGNATURE:

[Signature]

[Signature]

[Signature]

CR2E034 (9/96)