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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Feb 02 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** P95000082101 (3) ABC IMPORT & EXPORT INC. Principal Place of Business Mailing Address 970 N.E. 36TH STREET 970 N.E. 36TH STREET OAKLAND PARK FL 33334 OAKLAND PARK FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0621590 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHAFFER, KENNETH S 2130 N.E. 53RD STREET 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33308-3137 83 84 Zip Code 85 İ 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. 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 like it applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change ALLISON, JULY NAME 1.2 NAME 970 N.E. 36TH STREET STREET ADDRESS 1.3 STREET ADDRESS OAKLAND PARK FL 33334 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME 2,3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - ZIP DE) FIE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST-ZIP

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Change

Addition

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.

SIGNATURE:

17. 98

954-5660764 954-5660764 1-27-98 SIGNATURE:

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

DELETE

TITLE

NAME

STREET ADDRESS