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

**PROFIT** CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

CIGNATURE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 20 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P96000004377 (3)

QUARTERMASTER SUPPLIES OF VENEZUELA CORP.

Principal Place of Business Mailing Address 8410 NORTHWEST 53RD TERRACE 8410 NORTHWEST 53RD TERRACE SUITE 116 SUITE 116 DO NOT WRITE IN THIS SPACE MIAMI FL 33166 MIAMI FL 33166 3. Date incorporated or Qualified 01/12/1996 4. FEI Number 2. Principal Place of Business 28. Mailing Address Applied For 26 65-0640324 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 30 25 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **ERNESTO HUERTAS** E & V GREAT PROFESSIONAL, INC. 8001 NW 7ST #8 Street Address (P.O. Box Number is Not Acceptable) 55 46 S.W \$51 678 B2 MIAMI FL 33126 83 Zip Code 33/34 84 MIAMI 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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 Fonds, 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. 04-09-98 SIGNATURE (NOTE: Registored Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE PEDREANEZ, EVELIO NAME 1.2 NAME 8410 N.W. 53RD TERRACE, SUITE 116 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition **OLAVARRIETA, RICARDO** NAME 22 NAME 8410 N.W. 53RD TERRACE, SUITE 116 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33166 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE Change NAME OLAVARRIETA, ROSA . 8410 N.W.53RD TERRACE, SUITE 116 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS MIAMI, FL 33166 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 100002492951 -04/20/98--01001--012 DELETE TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00

6.4 CITY-ST-ZIP

04-09-98

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 supplemental entire type 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 receiver or typically supplemental entire type and accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed of on an afact hen typical entires.