

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 23, 2008 08:00 A
Secretary of State

DOCUMENT # P96000012648

1. Entity Name
TOKAY IMPORT & EXPORT, INC.



Principal Place of Business
**2600 S.W. THIRD AVENUE
SUITE 800
MIAMI, FL 33129**

Mailing Address
**2600 S.W. THIRD AVENUE
SUITE 800
MIAMI, FL 33129**



01162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0649012	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**ACEVEDO, RAFAEL A
2600 S.W. THIRD AVENUE
SUITE 800
MIAMI, FL 33129**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ACEVEDO, RAFAEL A 2600 S.W. THIRD AVENUE, SUITE 800 MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GUTIERREZ, CYNTHIA 2600 SW 3RD AVE, SUITE 800 MIAMI, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ACEVEDO, RAFAEL A JR 819 PARADISO AVE CORAL GABLES, FL 33146
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000792288
01/24/08-80001-020-158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-16-08 305-856-7586

Date

Daytime Phone #