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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000016956 (0)

EXPORT INTERNATIONAL, F.L., CORP.

14. I do hereby certify that the information's information indicated on this annual region.

Lam an officer or director of the cor appears in Block 12 or Block 13 if q

SIGNATURE:

Online of the		44.0 - 2.4.4						A TIH ING
Principal Place of Business Mailing Address						1 10011001 118 19110 91111 89111 89111 98117 9817 98181 HS 19 9	100 % 1818: B()	₩ 3/11 18 4 1
5512 NW 72 AVE MIAMI FL 33168		5512 NW 72 AVE MIAMI FL 33168-4206						
						3. Date Incorporated or Qualified 3a. Dat	e of Last R	teport
						02/23/1996		
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For
21		26				65.0643425		ot Applicable
Suite, Apt	#, etc	Surte, Apt. #, etc.	**1			5. Certificate of Status Desired		Additional
City & State		City 8 State	City & State					equired
23		28				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for intengible t		
24	25 29		30			Florida Statutes Yes No		
<u> </u>	9. Name and Address of Curre	nt Registered Agent				10, Name and Address of New Registered A	gent	
LOP	EZ, FRANCISCO			81	Name			
5512		ŀ	82	Street Addr	ress (P.O. Box Number is Not Acceptable)			
MIAI	MI FL 33166		Į.					
		•	1	83	ì			
				84	City		85 Zip	Code
dd D	10 1 207 81	00 - 1.007.41.00 11 - 1- 01.4				<u>FL</u>		
office or n	to the provisions of Sections 607,050 egistered agent, or both, in the State m familiar with, and accept the oblig	a of Fforida. Such change was	authorized	Ιbγ	the corporati	poration submits this statement for the purpose of dion's board of directors. I hereby accept the appo	intment as	is registered registered
SIGNATURE								
12.	Signal at type componed name of register class	icid aco tile il applicable (NC ID-DIRECTORS	TE Augistered	Age	nt signature requir	red when reinstating) DATE ADDITIONS/CHANCES TO OFFICERS AND	DIDECTOR	20 IM 40
TITLE	DP	DELETE	1,1 Til	 I F		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition
NAME	LOPEZ, FRANCISCO		1.2 NA			•		
STREET ADDRESS	5512 N.W. 72 AVE				ADDRESS			
C(TY+S1+Z)P	MIAMI FL 33166		1.4 CIT					
FITLE	DV	DELETE	2.1 TIT				Change	Addition
NAME	LOPEZ, CONSTANZA		2.2 NA	ME				
STREET ADDRESS	5512 NW 72 AVE		2.3 STF	REET	ADDRESS	•		
CITY-\$1-ZIP	MIAMI FL 33166		2. 4 Cl	TY-S	ot ZIP			
31115		☐ DELETE	3.1 TiT	LE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NAI	ME				
STREET ADDRESS			3.3 STF	REET.	ADDRESS			
City - St - ZiP		DELETE	3.4. CO		T-ZIP		Chance	I Addition
TITLE NAME		רייין מבנינונ	4.1 TIT			ľ	Change	Addition
			4, 2 NA		*DUDECC			
STREET ADDRESS CITY-ST-ZIP					ADDRESS T 7/D			
HITE		DELETE	4.4 CHT 5.1 Tit		1~ ZIF	·	Change	Addition
NAME		Party	5.2 NA			•		
STREET ADDRESS					ADDRESS			
CHTV - ST - 71P			5.4 CIT					
Till.E		☐ DELETE	6.1 TIT				Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 STF	REET.	ADDRESS			

6.4 CITY - ST- ZIP

on not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the if report is true and accurate and that my signature shall have the same legal effect as if made under oath; that stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

FILED
Jan 28 1997 8:00am
Secretary of State

