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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Miriham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000017241 (6)

FILED May 08 1997 8:00am Secretary of State

*	INO IMPORT & EXPORT						
Principal Place 441 NE 119ST MIAMI FL 3316		Mailing Address 441 NE 119ST MIAMI FL 33161-6231	II NE 119ST				
•					3. Date Incorporated or Qualified 02/23/1996	3a. Date of Las	t Report
		2a. Mailing Address 26	26		4. FEI Number 65 - 0646477	Applied For Not Applicable	
Sulte, Apt. 1		Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1	5 Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ad to Fees
Zip 24	Country 25 9. Name and Address of Curre	29	Count	ry	This corporation has liability for in Florida Statutes Name and Address of New Re	Yos No	er s. 199.032,
	ICIA, JOSE F	ant Hegistered Agent	8	1 Name	to. Name and Address of New Ae	Bisreted Agent	
441 NE 119ST MIAMI FL 33161			8		ress (P.O. Box Number is Not Acceptable)		
			8		ļ	85 Z	ip Code
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was	authorized (by the corporal	poration submits this statement for the pation's board of directors. I hereby acception	urpose of changin of the appointment	g its registered as registered
SIGNATURE	m tamiliar with, and accept the obli	9			ned when toinstaling)	DATE	
12.		ND DIRECTORS	13.	St. vir. seller and c. vir. do.	ADDITIONS/CHANGES TO OFFIC		ORS IN 12
TITLE	p	□ DELETE 11			☐ Change ☐ Ad		ge 🔲 Addition
NAME	GARCIA, JOSE F		IL2 NAMI	: [
STREET ADDRESS	441 NE 119ST		M.3 STRF	ET ADDRESS			
CITY-ST-ZIP	MIAM! FL 33161		1.4 CITY				
TALE	V [] DELETE		₽1 TitLE				ge L. Addition
NAME	ROSTREPO, MANUEL		22 NAM				
STREET ADDRESS	441 NE 119ST			L1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33161	DELETE	2.4 CITY 3.1 TITLE	- \$1 - ZiP		Chan	ne 🔲 Addition
NAME		Otten.	3.1 INCE			LJ Olian	fe Thypolegu
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-S1-7(P			
TITLE		DELETE	4.1 TITLE			Chang	ge Addition
NAME		-	4. 2 NAM			·	
STREET ADDRESS			ı	£1 ADDRESS			
CITY-ST-ZIP			4.4 CITY	- 1			
TITLE		DELETE	51 1IT(F			Chang	ge Addition
NAME			5.2 NAM	(
STREET ADDRESS			5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY	- S1 - ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Chan	ge 🔲 Addition
NAME			6.2 NAM	E			
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
 I do heret informatio 	by certify that the information suppling indicated on this annual report of	ied with this filing does not qual supplemental annual report is	ify for the el true and ac	kemption states	d in Section 119 07(3)(i), Florida Statute t my signature shall have the same lega	s. I further certify to deflect as if made	hat the under oath; tha

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(j). 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 eath; 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.

1-01/00/00

4-9-9= (305) 892 1621