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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90161 004 ***150.00

DOCUMENT # P9600029001

EXPORT-IMPORT EXPRESS, INC.

Principal Place	e or business	Mailing Address							
6555 N.W. 3671 MIAMI FL 3316	H STREET #111 6	6555 N.W. 36TH STREET #111 MIAMI FL 33166							
						DO NOT WRITE	IN THIS S	SPACE	
						3. Date Incorporated or Qualifed			
						04/03/1996			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	_	_ [Ar	pplied For
21		26				65-0655593		N	ot Applicable
Suite, Ap1. #, etc.		Suite, Apt. #, etc.				S. C. Warter of Olympia Province		\$8.75	Additional
22		27				5. Certifcate of Status Desired		Fee R	equired
City & Stat	e	City & State				6. Election Campaign Financing		\$5.00	Мау Ве
23		28				Trust Fund Contribution		•	to l ⁻ ees
Zip	Count y Zip C		Countr	Country		8. This corporation owes the current	it vear Irta	ngible	
24	25 29 30		30			Personal Property Tax.	-	Yes Yes	□No
	9. Name and Address of Current!	· — — — —				10. Name and Address of New Re	gisterec A	gent	
			8	1 1	Name				
FER	NANDEZ, JOSE R		<u> </u>	_					
6555 N.W. 36TH STREET #111			8:	2 Street Addin		ess (P.O. Box Number is Not Acceptable	e)		
MIAN	MI FL 33166		83	3					
				١.					
			84	4 (City			85 Zip	Ccde
				_			FI_		
11. Pursuant	to the provisions of Sections 607.0502 a	and 607.1508, Florida Statute Florida, Such change was au	s, the abor	ve-n v the	named corp	oration submits this statement for the pu on's board of directors. I hereby accept to	urpose of o	hanging its	s registered
agent. I a	m familiar with, and ac∋ept the obligatio	ns of, Section 607.0505, Flcri	da Statute	es.	o corpora io	sits board of a rostoro. Thoroby accept	ио аррии		,gxous
SIGNATURE									ļ
	Signature, typed or printed nar is of registered agent	nd title if applicable. (NOTE .f	Registered Age	ent si	ignature required	d when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITICNS/CHANGES TO OFFIC	CERS / NI		
TITLE	PD	☐ DELETE	1.1 TITLE					Change	Addition
NAME	Jimenez, Rubin R		1.2 NAME	•					1
STREET ADDRE 3S	6350 N.W. 198 TR		1.3 STREE	REET ADDRESS					ļ
CITY-ST-ZIP	MIAMI FL 33015		1.4 CITY-ST-ZIP		nP				
TITLE			2,1 TITLE					Change	Addition
NAME	FERNANDEZ, JOSE R		2,2 NAME						l
STREET ADORESS	6555 N.W. 36TH STREET, #111		2.3 STREET		nnpess				ĺ
	MIAMI FL 33166			2 4 CITY-ST-ZIP					ļ
CITY-ST-ZIP	MIAMI PL 33106			3.1 TITLE				Change	Addition
TITLE								onsinge	
NAME			3.2 NAME		Ì				ì
STREET ADORESS			3.3 STREE	ET AD	DRESS				
CITY-ST-ZIP			3 4. CITY-		<u>2)P</u>				
TITLE		☐ DELETE	4,1 TITLE					☐ Change	Addition
NAME			4. 2 NAME	E					ì
STREET ADDRESS			4.3 STREE	ET AD	ODRESS				}
CITY-ST-ZIP			4.4 CITY-	ST-Z	3P				
TITLE		☐ DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME	•	1				}
STREET ADDRESS			5.3 STREE	ETAD	ODRESS				
OTTY-ST-ZIP			5.4 CITY-	ST-Z	JP				J
TITLE		DELETE	6.1 TITLE					Change	Addition
		<u> </u>	6.2 NAME					3-	
NAME			6.3 STREE		INRESS				
STREET ADDR ESS			li .						ļ
CITY-ST-ZIP			6.4 CITY-:	SI-Zi	IP				

I here by certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signa are shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the race ver of truster 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, with all other like empowered PRESIDENT

SIGNATURE:

JOSE R. FERNANDEZ

4/27/99

(305)871-9800

Daytime Phone

CR2E034 (11/98)