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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

City-St-2IP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000048720 (2)

VIRA INTERNATIONAL IMPORT AND EXPORT, INC.

Principal Place of Business Mailing Address CONGLOMERADO INDUSTRIAL DE PUENTE REAL CONGLOMERADO INDUSTRIAL DE PUENTE REAL GALPONES 3 Y 3-A GALPONES 3 Y 3-A SAN CRISTOBAL. VENEZUELA SAN CRISTOBAL, VENEZUELA 3. Date Incorporated or Qualified 3a. Date of Last Report 06/05/1996 Principal Place of Business 9324 NW /3 STREET Applied For 324 NW 13 SPEET Not Applicable \$8.75 Additional Certificate of Status Desired Fee Regulred 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country A 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No. No. Name and Address of New Registered Agent 25 29 9. Name and Address of Current Registered Agent SANCHEZ, JUAN A 10691 N KENDALL DR, SUITE 310 62 MIAMI FL 33176 83 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered to State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered to obligations of, Section 607 0505, Florida Statutes. 11. Pursuarit office or SIGNATURE d name of scalatered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE DIRECTOR FANNY REY. FANNY 1.2 NAME RG) NAME osw 103 rd Peregge # 6104 TORRE C, PISO #1, EL MARQUEZ STREET ADDRESS 1.3 STREET ADDRESS CARACAS, VENEZUELA 1.4 CITY - ST - ZIP CHTY - ST - ZIP Change DELETE Addition 1111 F 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - \$1 - ZIP Change Addition HILE □ DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY-\$1-Z0 DELETE Change ☐ Addition THLE 4.1 TITLE **4.2 NAME** NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP C(1Y - S1 - 7# Change Addition DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - \$1 - 7/P Change Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. I do hereby 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 annual 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 12 or Block 13 if chapged, or on an attachment with an address.

ANGRE REQUIRED

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 29 1997 8:00am Secretary of State

0526358

| T 18 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1 ANNI 4611: 4111: 6111 | TOTAL BITTAL | a ni a a ki n a ki |
|--|-------------------------|--------------|---|
| | | | |
| - 1 14 0 1 1 0 1 1 1 1 1 1 1 1 1 1 | | | 8 88 78 |