

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

DOCUMENT # P96000051410

1. Corporation Name

PERMIMPORT ENTERPRISES INC.

Principal Place of Business

**13395 SW 131ST STREET
MIAMI FL 33186**

Mailing Address

**13395 SW 131ST STREET
MIAMI FL 33186**

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

04-29-1999 90290 009 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/17/1996

4. FEI Number

65-0676683

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 **13150 SW. 130TH TERR.**

26 **1201 N.E. 98TH ST.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Unit 3**

27

City & State

City & State

23 **MIAMI, FL**

28 **MIAMI SHORES, FL**

Zip Country

Zip Country

24 **33186** 25 **U.S.A.**

29 **33138** 30 **U.S.A.**

9. Name and Address of Current Registered Agent

**BERTRAN, EDUARDO
13395 SW 131ST STREET
MIAMI FL 33186**

10. Name and Address of New Registered Agent

81 Name

ENRIQUE GARCIA

82 Street Address (P.O. Box Number is Not Acceptable)

1201 N.E. 98TH STREET

83

84 City

MIAMI SHORES

FL

85 Zip Code
33138

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

ENRIQUE GARCIA / VP

3.25.99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE
NAME **PTD**
STREET ADDRESS **HERNANDEZ, LORI G**
CITY-ST-ZIP **7500 SW 165 TERR
MIAMI FL 33157**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **PRES**
1.3 STREET ADDRESS **CEZAR L. GARCIA**
1.4 CITY-ST-ZIP **1201 N.E. 98TH ST.
MIAMI SHORES, FL 33138**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **V.P.**
2.3 STREET ADDRESS **ENRIQUE GARCIA**
2.4 CITY-ST-ZIP **1201 N.E. 98TH STREET
MIAMI SHORES, FL 33138**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ENRIQUE GARCIA

3/25/99

(305) 757-0822

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)