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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000074515 (3)

U.S. DUTY FREE CORP.

Principal Place of Business

1342-48 N.W. 78 AVENUE #D MIAMPEL 33126 Mailing Address

1342-46 N.W. 78 AVENUE #D MIAMI FL 33126

FILED Jun 06 1997 8:00am Secretary of State



4/30/97

| | | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 09/03/1996 | | | | | |
|--|--|---------------------------------------|--|--|--|-----------------------------|----------------------------|--------------------------|--|
| 2. Principal Place of Business 21 2841 N.W. 107 4 26 2841 N.W. 107 4 ave | | | | | 4. FEI Number | 15° | ⊿ ⊢⊢ | oplied For | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | wie | 5. Certificate of Status Desired | | \$8.75 | ot Applicable Additional | |
| City & State City & State | | | | | 6. Election Campaign Financing | | \$5.00 | equired May Be | |
| Zig 7 Country 28 Man 2 Country 2 Cou | | | | | Trust Fund Contribution 8. This corporation has liability for | intennible | | to Fees | |
| 24 33 1 1 25 USA, 29 33 1 1 30 U.S.A. Florida Statutes | | | | | | | □ No | . 155.052, | |
| 9, Name and Address of Current Registered Agent 81 | | | | Name | 10. Name and Address of New Registered Agent | | | | |
| I AMOUDI, WISSAM | | | | | | | | | |
| 1342-46 N.W. 78 AVENUE #D MIAMI FL 33126 | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | 83 | | | | | |
| | | ł | 84 | City | | | 85 Zip (| Code | |
| • | | | | , | | _ FL | . | | |
| 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 | (NO1E: Registered | d Agent | signature require | d when roinstating) | DATE | | | |
| 12. | OFFICERS AND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | | DIRECTOR | S IN 12 | |
| TITLE | DELU | 1.1 TI | ILE | | | | Change | Addition | |
| NAME | AMOUDI, WISSAM | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 1342-46 N.W. 78 AVENUE #D | | REE1 AC | 1 | | | | | |
| CITY-ST-ZIP TITLE | MIAMI FL 33126 | | TY-ST- | ZIP | | | Change | Addition | |
| NAME . | Amondi, wiserem | 22 NA | | | | | onengo | | |
| STREET ADDRESS | 3841 n. w. 107 thank 235 | | REET AC | ODRESS | | | | | |
| CITY-ST-ZIP | miami , FL 3317 2 | 2 4 0 11 | | ZIP | | | | | |
| TITLE | □ DELI | 31 TO | 3 1 TITLE | | | | Change | Addition | |
| NAME | | 3 2 NA | | | | | | | |
| STREET ADDRESS | | | REET AC | | | | | | |
| CITY-ST-ZIP TITLE | DEL | | IIY-ST- | - ZIP | | | Change | Addition | |
| NAME | | 4.2 N | | | | | C.J Onango | | |
| STREET ADDRESS | | | reet at | OORESS | | | | | |
| CITY-ST-ZIP | | | TY-ST-: | | | | | | |
| TITLE | ☐ DEL(| ETE 5.1 TH | ILF. | | | | ☐ Change | Addition | |
| NAME | | 5.2 NA | ME | | | | | | |
| STREET ADDRESS | | 5.3 ST | reet ac | DDRESS | | | | | |
| CITY-ST-ZIP | | | 1Y-SI- | ZIP | | | | | |
| TITLE | □ DELI | | | | | | Change | | |
| NAME | | 6.2 NA | | | | | | | |
| STREET ADDRESS | | | REET A | ĺ | | | | | |
| CITY-ST-ZIP | ov certify that the information supplied with this filing decrease | 6.4 CI | IY-SI- | otion stated | in Section 119 07(3)(i) Florida Statute | e I furthe | r certify that | the | |
| informatio I am an of | by certify that the information supplied with this filing does not indicated on this annual report or supplemental annual refficer or director of the corporation or the receiver or trustee | port is true and a emplowered to e | xecut | ate and that r te this report | my signature shall have the same lega as required by Chapter 607, Florida S | al effect as Statutes; a | if made un nd that my r | der oath; that name | |