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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000074695 (3)

EXODUS IMPORT & EXPORT INTERNATIONAL, INC.

rincipal Place of Business	Mailing Address		
9264 NEPTUNES BASIN COURT	9264 NEPTUNES BASIN COURT		
BOCA RATON FL 33434	BOCA RATON FL 33434		

FILED May 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									
9264 NEPTUNES BASIN COURT 9264 NEPTUNES BASIN C BOCA RATON FL 33434 BOCA RATON FL 33434						DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified	
	<u>.</u>	.,						09/09/1996	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For	
21			26	- 4 1				65-0695148 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State				City & State				6. Election Campaign Financing\$5.00 May Be	
23			28	·4·				Trust Fund Contribution	
Zip	ten i de la companya		h	8. This corporation owes or has paid the current year Intangible					
24		25	29	stared Agent	30	<u> </u>		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
		and Address of Curre	aur Heðu	stered Agent		B1	Name	10. Name and Address of New Registered Agent	
		R CHARTERED							
343 ALMERIA AVENUE CORAL GABLES FL 33134					82	Street Address (P.O. Box Number is Not Acceptable)			
	IME ONDE	2012 00104				83			
						84	City	FL 85 Zip Code	
dd. Dine reed t	a the provin	one of Continue 607 00	02 and 6	CO7 1509 Florido Stat	tutor the r)	named o		
11. Pursuant to the provisions of Sections 607.050? 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, type-for produce names of registered agent and tile if applicable (NOTE Registered Agent signature required when reinstating) OATE									
12,	Signature, type-t	OFFICERS A			13.		on algricite i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD			DELETE		TILE		Change Addition	
NAME		_, SUSAN M			1.21	IAME			
STREET ADDRESS 9264 NEPTUNES BASIN COURT				1.3 9	STREET	ADDRESS			
CITY-ST-ZIP	BOCA R	ATON FL 33434			1.40	OITY-S	ST-ZIP		
TITLE				DELETE	2.11	ITLE		Change Addition	
NAME					2.21	IAME			
STREET ADDRESS					2.3 5	STREET	ADDRESS		
CITY-ST-ZIP							S1-ZIP		
TITLE				DELETE		ITLE		Change Addition	
HAME						IAME			
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP			· · · ·	DELETE		•	ST-ZIP	Change Addition	
TITLE						ITLE NAME		Li Change Li Mullion	
NAME							ADODECC		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP TITLE				DELETE		JITLE	61 - ZIP	Change Addition	
NAME				_ v	i i	NAME			
STREET ADDRESS							ADDRESS		
1							- 1		
CITY-ST-ZIP				DELETE	5.4 CITY - ST - ZIP 6.1 TITLE			Change Addition	
NAME					- 1	MAME			
STREET ADDRESS					1		ADDRESS		
CITY-ST-ZIP							ST - ZIP		
OIL1-01-51							استنب		

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 suppliemental 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 truspic 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.

11/20/98