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 # P96000085393 (2)

R & O IMPORT EXPORT INC.

Principal	Place o	f Busines	S

Mailing Address

11241 SW 40 ST., APT. 9 MIAMI FL 33165 11241 SW 40 ST., APT. 9 MIAMI FL 33165-4467

FILED Jan 28 1997 8:00am Secretary of State



2. Principal P 21 Suite, Apr 22 City & State 23 Zip 24 33	Medley 46. 78 25 USA	Suite, Apt. #, etc 27	w 89 th Åv.	5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 6. This corporation has liability for Florida Statutes	\$8.75 Fee \$5.0 Adde intangible tax under	Applied For Not Applicable Additional Required May Be d to Fees
1124 MIAI	9. Name and Address of Current VER, RICHARD 41 SW 40 ST., APT. 9 MI FL 33165 to the provisions of Sections 607.0502 registered agent, or both, in the State im lanar ar with, and accept the obliga	≥ and 607.1508. Florida Statutes	81 Name 82 Street Ac 83 84 City s, the above-named conthorized by the corpordid Statutes.	10. Name and Address of New Reddress (P.D. Box Number is No. Attepta	FL 85 Zi	p Code 3 7 8 3 its registered as registered
SIGNATURE	Signatine, type dur protect name of regeneral diagen	called the itapplicable (NOTE	Registered Agent signature re-	quired when reinstating)	DATE	
12.	OFFICERS AND) DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	ORS IN 12
TUTLF	DPST	DELETE	1.1 TITLE		☐ Change	DRS IN 12 e Addition
NAME	OLIVER, RICHARD		. 1.2 NAME];
STREET ADDRESS	11241 SW 40 ST., APT. 9		1.3 STREET ADDRESS			
C:T r - ST - Z)P	MIAMI FL 33165		1.4 CITY - ST - ZIP			
THILF		☐ DELETE	21 TITLE		Change	e 🛄 Addition 🛚 '
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
C 19 S1-ZiP			2 4 CITY-ST-ZIP			
TO!LE		☐ DELETE	3.1 TITLE		Change	e 🔲 Addition
NAME			3.2 NAME			
STEEET ADORESS			3.3 STREET ADDRESS	•		
C Tr. ST-ZIP			3 4. CITY-ST-ZIP			
THTLE		☐ DELETE	4.1 TITLE		☐ Change	e
NAME			4. 2 NAME	•		
STREET ADDRESS			4.3 STREET ADDRESS			
CiTir - ST - ZiP			4.4 CITY - ST - ZIP			
TI L (DELETE	5.1 TITLE		☐ Change	e Addition
NAME			5.2 NAME			
STHEET ADDRESS			5.3 STREET ADDRESS	. •		
C Tri-ST-ZIP			5.4 CITY - ST - ZIP			
TITEE		DELETE	6.1 TITLE		☐ Change	e Addition
NAME			6.2 NAME		-	
STREET ADDRESS			6.3 STREET ADDRESS			
Oliri-ST-7IP			6.4 CITY-ST-ZIP			
2011 17 111	L		STORE OF ER			

14. Loo 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 endoated 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/20/97

883-9853

rnone #