## 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

## P96000088923 (3)

**FILED** Feb 24 1998 8:00am Secretary of State

MNIEO	MIPONT	X EXPORT INC.						
Principal Place of Business			Mailing Ad	idress			I LOUDEAUN HIG LOUIS CONT.	
12010 SW 315 MIAMI FL 331				12010 SW 31ST ST MIAMI FL 33175			DO NOT WRITE IN THIS SPACE	
							3. Date incorporated or Qualified	
							10/29/1996	
2. Principal P	lace of Busi	ness	2a. Mailing	Address			4. FEI Number Applied For	
21			26	26			65-0704149 Not Applicabl	
Suite, Apt. #, etc			Suito, A	Suito, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional	
22			27				Fee Hequired	
City & State			h	City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country				Zip Country			Trust Fund Contribution	
24	25		<u> </u>	29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
[24]	o Name	and Address of Cur			, , , , , , , , , , , , , , , , , , ,		10. Name and Address of New Registered Agent	
AC(	OSTA, NEL			£	81	Name		
	10 SW 31					Out at A	(DO Do Mark Laris No. Accordance)	
	MI FL 331				82	Street Ac	Address (P.O. Box Number is Not Acceptable)	
mic	mi i C 00 i	10			83			
					-	<b>6</b> 00 -		
					84	City	FL  85   Zip Code	
11. Pursuant office or r agent. I a	to the provis egistered a m familiar w	sions of Sections 607.0 gent, or both, in the SI ith, and accept the ob	0502 and 607.1508, ate of Florida Such oligations of, Section	, Florida Statutes i change was au n 607.0505, Flori	s, the above thorized by ida Statutes	e-named corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE								
	Signature, typick	for printed name of repistered		e (NOTE		nt signature re	required when reinstating) DATE	
12.	PSD	OFFICERS	AND DIFFECTORS	DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Additio	
NAME		A, NELSON	'	La beceit	1.2 NAME		C Overling Notice	
STREET ADORESS		SW 31ST STREET			1.3 STREET	ADDOCCC		
CITY-ST-ZIP		L 33175			1.4 CITY - S	ľ		
TITLE	INPOSITI	L 00170		DELETE	2.1 TITLE	1-211	Change Addition	
NAME			·		2.2 NAME		_ · _ ·	
STREET ADDRESS					2.3 STREET	ADDRESS		
CITY-ST-ZIP					2 4 CITY-5			
TITLE				DELETE	3 1 TITLE		☐ Change ☐ Additio	
NAME					3 2 NAME	}		
STREET ADDRESS					3.3 STAEET	ADDRESS		
CITY-ST-ZIP					3.4. CITY - 5	ST-ZIP		
TITLE				DELETE	4.1 TITLE		Change Addition	
NAME					4. 2 NAME			
STREET ADDRESS					4.3 STREET	ADDRESS		
CITY-ST-ZIP		·			4.4 CITY-S	T- ZIP		
TITLE			•	DELETE	5.1 TITLE		Change Addition	
NAME					52 NAME	-		
STREET ADDRESS					5 3 STREET			
CITY-ST-ZIP				Dutte	5.4 CHY-S	T-ZIP	Change   Laddin	
TITLE				DELETE	6.1 TITLE		Change Addition	
NAME					6.2 NAME	1000000		
STREET ADDRESS					6.3 STREET			
CITY-ST-ZIP	Ì				6.4 CITY - S	T-ZIP		

14. I hereby certify that the information supplied with this filling 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 on the receipter 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 gripping with an address

SIGNATURE:

ACOSTA