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PROFIT
CORPORATION
ANNUAL REPORT

CITY ST-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000089018 (1)

R & S IMPORT, EXPORT CORP.

Mailing Address Principal Place of Business 2500 NW 15 CT. 2500 NW 15 CT. POMPANO BEACH FL 33069 POMPANO BEACH FL 33069-1519 3. Date Incorporated or Qualified 3a. Date of Last Report 10/29/1996 4 FFI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. oto Suite, Apt. #. etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PENA, ROQUE 2500 NW 15 CT. 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33069 63 City 85 Zip Code 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, type il or printed name of registered agent and title il applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. 96/6) DELETE Change Addition 1.1 TITLE TITLE PENA. ROQUE 1.2 NAME NAME 2500 NW 15 CT. STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33069 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition THILE 2.1 TITLE PENA, SOL 22 NAME 2500 NW 15 CT. STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL 33069 2. 4 CITY-S1-ZIP CH +- S1 - 2# DELETE TILL 31 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CDY 51-20 DELETE 4.1 TITLE Change Addition THEF 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change ■ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST- 7IP DELETE Addition 6.1 TITLE Change TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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 arm 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