

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

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PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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FILED

97 SEP 26 11 7:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P96000090783 (7)**  
 1. Corporation Name  
**I.M.C. IMPORT & EXPORT, CORP.**



Principal Place of Business <b>10352 S.W. 212 STREET SUITE 206 MIAMI FL 33189</b>	Mailing Address <b>10352 S.W. 212 STREET SUITE 206 MIAMI FL 33189</b>
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DO NOT WRITE IN THIS SPACE

<b>21</b> 2. Principal Place of Business Suite, Apt. #, etc.	<b>26</b> 2a. Mailing Address Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>30</b> Country

<b>3.</b> Date Incorporated or Qualified <b>11/05/1996</b>	<b>3a.</b> Date of Last Report
<b>4.</b> FEI Number <b>595-360368</b>	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**VASQUEZ, JESSICA**  
**10352 S.W. 212 STREET**  
**SUITE 206**  
**MIAMI FL 33189**

**10. Name and Address of New Registered Agent**

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City **FL** **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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> DELETE
NAME	VASQUEZ, JESSICA C	
STREET ADDRESS	10352 S.W. 212 STREET, SUITE 206	
CITY-ST-ZIP	MIAMI FL 33189	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	COLINA, IVAN JOSE	
STREET ADDRESS	8803 S.W. 68 COURT, 24	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	COLINA, PILAR	
STREET ADDRESS	8803 S.W. 68 COURT, #24	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	COLINA, MICHAEL	
STREET ADDRESS	10352 S.W. 212 ST., #206	
CITY-ST-ZIP	MIAMI FL 33189	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<b>300002309243--7</b>
3.4 CITY-ST-ZIP	<b>-10/01/97--01104--007</b>
	<b>****165.00 ****165.00</b>
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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**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 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 \_\_\_\_\_

CR2E034 (4/97)



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SEP 23, 1997  
MIAMI FL

I.M.C INPORT AND EXPORT  
DOCUMENT # P96000090783

TO WHOM IT MAY CONCERN:

I AM WRITING TO INFORM YOU THAT I DID NOT RECEIVE THE FIRST ANNUAL REPORT. THEREFOR, I AM SUBMITTING A CHECK OF \$165.00 FOR MY FILING FEE.

IF YOU HAVE ANY QUESTIONS PLEASE FEEL FREE TO GIVE ME A CALL AT (305)-256-8187 OR (305)-266-0708.

SINCERELY,

  
JESSICA VASQUEZ  
PRESIDENT.

**I.M.C. Corporation**