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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P96000092937 (7) INTECOR EXPORT COMPANY

Principal Place of Business

Mailing Address

8390 W. FLAGLER ST. STE. 213 MIAMI FL 33144

8390 W. FLAGLER ST. STE. 213 MIAMI FL 33144

FILED Apr 28 1998 8:00am Secretary of State



							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/13/1996				
						ſ					
2. Principal Pl	ace of Business	2a. Mail	2a. Mailing Address				4. FEI Number			oplied For	
21		26					65-0703400	· · · · · · · · · · · · · · · · · · ·		ot Applicable	
Suite, Apt.	#, etc.	Suite 27	Suite, Apt. #, etc.			1	5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	9	City	& State				6. Election Campaign Financing		\$5.00	May Be	
23		28				i	Trust Fund Contribution			to Fees	
Zip	Country	Zŧρ		Cour	try		8. This corporation owes or has p	aid the curre	ent year In	tangible	
24	25	29		30			Personal Property Tax due Jun			□ No	
	9. Name and Address of Curre	nt Registered	l Agent				10. Name and Address of New R	egistered A	gent		
MIL	a, pablo				31 Nar	me				İ	
8390 W. FLAGLER ST. STE. 213					32 Stre	eet Address	(P.O. Box Number is Not Accepte	ible)			
MIAMI FL 33144											
				Į.	B3			<u>-</u>			
				};	84 City	y		FL	85 Zip	Code	
44 Discussion	to the provisions of Sections 607.050	12 and 607 46	OR Florida Ctatut	ne the et		and acres	ation submits this statement for the		hanciar '	te registered	
office or re agent. I ar	egistered agent, or both, in the State of familiar with, and accept the oblig	of Florida Stations of Sec	uch change was a stion 607.0505, Fig.	authorized orida Statu	by the dites.	corporation	's board of directors. I hereby acce	ept the appo	intment as	registered	
	Signature, typed or printed name of registeriid ap				Agent sign	ature required v	vhen reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTOR		13.			ADDITIONS/CHANGES TO OFF				
TITLE	DP DADIO		☐ DELETE	1.1 7(1)				ι	Change	Addition	
NAME	MILA, PABLO			1.2 NA	AE					,	
STREET ADDRESS	8390 W. FLAGLER ST. STE.	213		1.3 STR	EET ADDRE	SS]	
CITY-ST-ZIP	MIAMI FL 33144				Y-ST-ZIP						
TITLE	DST		DELETE	2.1 TITI	_			ι	Change	Addition	
NAME	MILA, NANCY	040		2.2 NAI		ļ					
STREET ADDRESS	8390 W. FLAGLER ST. STE.	213		2.3 STP	EET ADDRE	SS)				Į	
CITY-ST-ZIP	MIAMI FL 33144				Y-ST-ZIP						
TITLE	DV		DELETE	31111		1		l	Change	Addition	
NAME	MILA, MICHAEL R			32 NAI]	
STREET ADORESS	8342 SW 5TH ST.				EET ADDRE	. · · [Ì	
CITY-ST-ZIP	MIAMI FL 33144		I DELETE		Y-ST-ZIP				10	A 3 3 11 2 2 2	
TITLE			☐ DELETE	4.1 111		}		i	Change	Addition	
NAME				4.2 NA						J	
STREET ADDRESS					EET ADDRE	SS]	
CITY-ST-ZIP			Dever		Y-ST-ZIP				16		
TITLE			DELETE	5.1 TITI				l	Change	Addition	
NAME I				5.2 NA						ł	
STREET ADDRESS					EET ADDRE	SS					
CITY-S1-ZIP			The state		Y-ST-ZIP		······································		1 01		
TITLE			DELETE	6.1 TIT]		ı	Change	Addition	
NAME (6.2 NAJ	ΑE	ĺ				ĺ	
STREET ADDRESS				63 STF	EET ADDRE	SS				j	
CITY, ST. 7IP				64.00	V_ QT_ 7IP	(í	

14. 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 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, of the plackment with an address.

SIGNATURE:

Daytime Phone #

0207609