

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

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000092950 (0)
 1. Corporation Name
LU-MAR EXPORTERS, INC.



Principal Place of Business 17432 NW 7TH ST. PEMBROKE PINES FL 33029	Mailing Address 17432 NW 7TH ST. PEMBROKE PINES FL 33029
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/13/1996

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Zip	25. Country
29. Zip	30. Country

4. FEI Number APPLIED FOR 65 0682569	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. 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
**RODRIGUEZ, MARIO E
 17432 NW 7TH ST.
 PEMBROKE PINES FL 33029**

10. Name and Address of New Registered Agent

81 Name MARIO L. RODRIGUEZ
82 Street Address (P.O. Box Number is Not Acceptable) 19330 W. Oakmont Dr.
83
84 City MIAMI
85 Zip Code FL 33015

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 **MARIO L RODRIGUEZ, President** **4 24 98**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature Required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE DP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RODRIGUEZ, LUISA O		1.2 NAME RODRIGUEZ, MARIO L.	
STREET ADDRESS 17432 NW 7TH ST.		1.3 STREET ADDRESS 19330 W. Oakmont Dr.	
CITY-ST-ZIP PEMBROKE PINES FL 33029		1.4 CITY-ST-ZIP MIAMI FL 33015	
TITLE DVS	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RODRIGUEZ, MARIO L		2.2 NAME	
STREET ADDRESS 17432 NW 7TH ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP PEMBROKE PINES FL 33029		2.4 CITY-ST-ZIP	
TITLE DT	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RODRIGUEZ, MARIO E		3.2 NAME	
STREET ADDRESS 17432 NW 7TH ST.		3.3 STREET ADDRESS	
CITY-ST-ZIP PEMBROKE PINES FL 33029		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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: **MARIO L RODRIGUEZ** **4 24 98**

CF2E034 (10/97)