## 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

DOCUMENT #

P96000097213 (8)

READY EXPORT CO.

**FILED** May 04 1998 8:00am Secretary of State



						<u> </u>		
Principal Place of Business Mailing Address						7 109 (109 100 100 100 100 100 100 100 100 100	// <b>/// 18</b> *// 18 <b>010</b> 1* <b>801</b> 1	11484 (111 1841
8976 TAFT STREET. UNIT 9 8976 TAFT STREET. UNIT 9								
AT PINE LAK PEMBROKE I	(E8 Plaza Pin <b>e</b> s fl 33024	AT PINE LAKES PLAZA PEMBROKE PINES FL 33024				DO NOT WRITE IN THIS SPACE		
						<ol> <li>Date Incorporated or Qualified</li> <li>12/02/1996</li> </ol>		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0711325	<del></del>	lot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	<del>                                     </del>				60.75	Additional
22		27				5. Certificate of Status Desired	Fee R	Required
City & State	6	City & State				8. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Cour	ntry		B. This corporation owes or has paid th		ntangible
24	25	29	30			Personal Property Tax due June 30.		No
ļ	9. Name and Address of Current	Registered Ageni			7.	10. Name and Address of New Registe	ered Agent 🔏	
	NIA, JOSEPH S CPA P			81	Name			
	82 TAFT ST		82 Street Ac		Street Add	ress (P.O. Box Number is Not Acceptable)		
PE	MBROKE PINES FL 33024		63				<del></del>	
			-	64	City		<b>85</b> 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								
Signature, typed or printed hame of registered agent and title if applicable (NO1E: Registere					t signature requ		ATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE	PSD DAFAEL	DELETE	1.1 TIT		İ		☐ Change	Addition
NAME	REYNOSO, RAFAEL		- E	1.2 NAME				
STREET ADDRESS	8976 TAFT STREET, UNIT 9 PEMBROKE PINES FL 33024		1.3 STREET ADDRESS					li
CITY-ST-ZIP	PEMBRUKE PINES PL 33024	N ACCO	1.4 CH		- ZIP		Change	Addition
TITLE	CONC	(X) OELETE)	2 1 TIT				L Change	☐ Addition
NAME	STREET LINE O		2.2 NA					
STREET ADDRESS	The state of the s				DDRESS			
CITY-ST-ZIP	VID	☐ DELETE	2 4 CF 3 1 TiT		- ZIP		Change	Addition
TITLE	REYNOSO, JOSEFINA M							☐ Addition
NAME ATTECT ADDRESS	8976 TAFT STREET, UNIT 9		3.2 NA		202000			1
STREET ADDRESS	PEMBROKE PINES FL 33024		- 1		DDRESS			
CITY-ST-ZIP TITLE	V	DELETE	3.4. CII 4.1 TIT		- 2117		Change	Addition
NAME	FUENTES, EMILIO	L better	4.1 III				C) Shande	
	8976 TAFT STREET, UNIT 9				DDDCCC			
STREET ADDRESS	PEMBROKE PINES FL				DDRESS			
CITY+ST-ZIP Title	T CINDATOTIC TIMES TE	DELET <b>E</b>	4.4 CIT 5.1 TITI		-ZIP		Change	Addition
NAME		- occent	5.2 NA					
STREET ADDRESS					DDRESS			
			4					
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CIT		- 414	р 1	Change	Addition
			6.1 TITLE 6.2 NAME				onnigo	
NAME CERTE ARROPECE		<b></b>			DODECC			ļ
STREET ADDRESS			- 1	6.3 STREFT ADDRESS 6.4 CITY-ST-ZIP				
CITY-ST-ZIP			6.4 CIT	1-51-	- ZIF			

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 changed, or on an attaching with an address.