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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

9020 S.W. 77TH AVENUE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000098213 (7)

TEACHER IMPORT & EXPORT INC.

9020 S.W. 77TH AVENUE MIAMI FL 33156-7637 MIAMI FL 33156 3. Date Incorporated or Qualified 3a. Date of Last Report 12/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65.0731632 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z\omega$ Country Country Zio 8. This corporation has liability for intangible tax under s. 199.032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name OLIVEIRA, PAULO ANDRADE 9020 S.W. 77TH AVENUE Street Address (P.O. Box Number is Not Acceptable) **#E** 10 83 MIAMI FL 33158 84 City 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 fin the State of lorida. 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 vgishmeg agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ONCICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 101.8 1.1 TITLE Change Addition OLIVEIRA, PAULO ANDRIADE NAME 1.2 NAME 9020 S.W. 77TH AVENUE. #E10 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33156** CITY - ST - 7IP 1.4 City - St - ZiP DELETE Buch 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - 21P 2. 4 CITY-ST-ZIP THE DELETE 31 TITLE Change Addition NAMI 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CHY-SI-ZIP 3.4. CITY-ST-ZIP DELETE Addition THUE 4.1 TITLE

64 CITY-ST-ZIP 14. I do nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, 1 further certify that the information indicated on this author upport 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 (I changed or on an attachment with an address).

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TIFLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

NAME

THILE

NAME

HILE

NAMÉ

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CiTY - S1 - 7IP

COTY - ST. ZIP

CHY-ST 7IP

DELETE

DELETE

FILED

Apr 23 1997 8:00am

Secretary of State

Change

Change

Addition

Addition