**FILED** 

Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90104 017 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9700005659

1. Corporation Name

R.F. INTERNATIONAL EXPORT TRADING, INC.

Principal Place of Business Mailing Address								
13069 SW 122N		13727 SW 152ND STREET	13727 SW 152ND STREET			•		
MIAMI FL 33186		MIAMI FL 33186						
US		U\$			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed		
- 51 175	( C C C C C C C C C C C C C C C C C C C	a Mailine Address				01/21/1997 4. FEI Number Applied For		
2. Principal Place of Business 2a. Mailing Address 21						65-0723232 Not Applicable		
Suite, Apt.	Suite, Apt. #, etc.	ot # etc			\$8.75 Additional			
	#, etc.	27	Julie, Apr. #, etc.			5. Certificate of Status Desired Fee Required		
City & State	Α	City & State				6. Election Campaign Financing \$5.00 May Be		
23	_	28	<del>-</del>			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Zip Country			8. This corporation owes the current year Intangible		
24	25					Personal Property Tax.		
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered Agent		
				81	Name			
FERNANDEZ, ROBERTO				82	Street Ad	t Address (P.O. Box Number is Not Acceptable)		
	9 SW 143 PLACE			.				
MIAN	AI FL 33186			83		,		
				84	City	85 Zip Code		
					_	FL     '		
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								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE						41-		
	Signature, typed or printed name of registered age			Agen	t signature requ	uired when reinstating) DATE		
12.		ND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition		
TITLE	PD Fernandez, Roberto		1.2 NAME					
NAME	15119 SW 143 PLACE		1		ADDRESS			
STREET ADDRESS	MIAMI FL 33186							
CITY-ST-ZIP TITLE	STD	☐ DELETE	1.4 CITY-S 2.1 TITLE		1.219	☐ Change ☐ Addition		
	FERNANDEZ, MUNIRA		2.2 NAME			_ , _		
NAME	15119 SW 143 PLACE	· •	2.3 STREET		ADDESS	and the second of the second o		
STREET ADDRESS	MIAMI FL 33186		2.4 CI					
CITY-ST-ZIP TITLE	IMPAIR LE GO 100	☐ DELETE	3.1 TII			☐ Change ☐ Addition		
NAME		<del>_</del>	3.2 NA		ŀ			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	•		3.4. CI		1			
TITLE		☐ DELETE	4.1 TIT	-		☐ Change ☐ Addition		
NAME			4. 2 N	AME	•			
STREET ADDRESS					TADDRESS			
CITY-ST-ZIP			4.4 CI					
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Addition		
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET	ADDRESS			
CITY-ST-ZIP			5.4 CF	TY-S1	T-ZIP	<u></u>		
TITLE		☐ DELETE	6.1 TT	LE		. Change Addition		
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET	FADDRESS			

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINT

Daytime Phone #