

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

FILED

Mar 23 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 # **P97000013607 (1)**

1. Corporation Name

IMPORTGROUP, CORP.

Principal Place of Business

**12339 SW 132ND CT.
MIAMI FL 33186**

Mailing Address

**12339 SW 132ND CT.
MIAMI FL 33186**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1997

4. FEI Number

65-0729914

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Election Campaign Financing



**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **777 NW 72 AVE**

26 **777 NW 72 AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **2 M 8**

27 **2 M 8**

City & State

City & State

23 **MIAMI, FL.**

28 **MIAMI, FL.**

Zip

Country

Zip

Country

24 **33126**

25 **U.S.A.**

29 **33126**

30 **U.S.A.**

9. Name and Address of Current Registered Agent

**PERALTA, JAVIER
12339 SW 132ND CT.
MIAMI FL 33186**

10. Name and Address of New Registered Agent

81 Name

JAVIER PERALTA

82 Street Address (P.O. Box Number is Not Acceptable)

777 NW 72 AVE.

83

SUITE 2 M 8

84

MIAMI, FL.

85

FL

86

33126

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 name of registered agent and title if applicable

(NOTE: Registered agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **PERALTA, JAVIER**
STREET ADDRESS **12339 SW 132ND CT.**
CITY - ST - ZIP **MIAMI FL 33186**

TITLE **DST** ☐ DELETE

NAME **PERALTA, JUAN C**
STREET ADDRESS **12339 SW 132ND CT.**
CITY - ST - ZIP **MIAMI FL 33186**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **DP** ☒ Change ☐ Addition

1.2 NAME **JAVIER PERALTA**
1.3 STREET ADDRESS **777 NW 72 AVE 2 M 8**
1.4 CITY - ST - ZIP **MIAMI, FL 33126**

2.1 TITLE **DP** ☒ Change ☐ Addition

2.2 NAME **PERALTA, JUAN C**
2.3 STREET ADDRESS **777 NW 72 AVE 2 M 8**
2.4 CITY - ST - ZIP **MIAMI, FL 33126**

3.1 TITLE **TREASURER** ☐ Change ☒ Addition

3.2 NAME **LUCY PERALTA**
3.3 STREET ADDRESS **777 NW 72 AVE 2 M 8**
3.4 CITY - ST - ZIP **MIAMI, FL 33126**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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:

JAVIER PERALTA **03-17-98 (300) 2617374**

CR2E034 (10/97)