

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

FILED
May 07, 1999 8:00 am
Secretary of State

05-07-1999 90006 050 ***158.75

DOCUMENT # P97000013607

1. Corporation Name

IMPORTGROUP, CORP.

Principal Place of Business

777 NW 72 AVENUE
2M8
MIAMI FL 33126
US

Mailing Address

777 NW 72 AVENUE
2M8
MIAMI FL 33126
US

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
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 777 NW 72 AVE

2a. Mailing Address

26 777 NW 72 AVE

Suite, Apt. #, etc.

22 2M8

Suite, Apt. #, etc.

27

City & State

23 Miami, FL

City & State

28

Zip

24 33126

Country

25 USA

Zip

29

Country

30

9. Name and Address of Current Registered Agent

PERALTA, JAVIER
777 NW 72 AVENUE
SUITE 2M8
MIAMI FL 33126

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 2M8

84 City

MIAMI

FL

85 Zip Code

33126

11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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

04-20-99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DP
STREET ADDRESS PERALTA, JAVIER
CITY-ST-ZIP 777 NW 72 AVENUE, 2M8
MIAMI FL 33126

TITLE ☐ DELETE

NAME DS
STREET ADDRESS PERALTA, JUAN C
CITY-ST-ZIP 777 NW 72 AVENUE, 2M8
MIAMI FL 33126

TITLE ☐ DELETE

NAME T
STREET ADDRESS PERALTA, LUCY
CITY-ST-ZIP 777 NW 72 AVENUE, 2M8
MIAMI FL 33126

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04-20-99 (305) 2617374

CR2E034 (11/98)