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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State\*

DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000028367 (5)

## FILED Apr 01 1998 8:00am Secretary of State

Z & E IMPORT AND EXPORT, INC. Principal Place of Business Mailing Address 8414 NW 61ST STREET 8414 NW 61ST STREET MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/28/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 8414INW 61 STREET 8416 NW 61 STREET 65-0744100 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing MIAMI Miami, Trust Fund Contribution Added to Fees 23 28 Zin Country Country 8. This corporation owes or has paid the current year Intangible 33166 ☐ Yes USA Personal Property Tax due June 30. 25 USA 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ECKARDT ) OCKARDT, OSVALDO ECKARDT, OSWALDO Street Address (P.O. Box Number is Not Acceptable) 8414 NW 61ST STREET 82 MIAMI FL 33166 в3 84 City Zip Code 33166 MIAMI 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) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TITLE PRESIDENT PRESIDENT NAME 1.2 NAME OSWALDO ECKARDT OSWALDO ECKARDT 1.3 STREET ADDRESS STREET ADDRESS 10320 SW 142 CT 10320 SW 142 CT 1.4 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33186 MIAMI FL 33186 DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby certify that the information applied 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 of 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 truries empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changest with an address.

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