

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

FILED
May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # D94000028408			
1. Corporation Name SILVERGATE IMPORT AND EXPORT CORPORATION			
Principal Place of Business 10964 SW 135th Court Circle Miami, FL. 33186		Mailing Address 12317 SW 132nd CT MIAMI FL 33186	
2. Principal Place of Business 21 12317 SW 132nd Ct. Suite, Apt. #, etc 22 City & State 23 Miami, Florida Zip 24 33186 Country 25		2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country 30	
9. Name and Address of Current Registered Agent Manuel Arthur Mesa, Esq. 1000 Brickell Avenue, Suite 660 Miami, FL. 33131-3014		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 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 agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.			
SIGNATURE: _____ (NOTE: Registered Agent's signature required when reinstating) DATE: _____			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D Valvezan, Gilberto Jr. 10964 SW 135th Court Circle Miami, FL. 33186		11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP D Baptiston Cefali, Andre 10964 Sw 135th Court Circle Miami, FL. 33186		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition	
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 registered agent so empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this filing.			
SIGNATURE: _____ SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		400002528334 -05/19/98--01019--004 ***150.00 4/30/98 305-232 9400	

CR2E034 (10/97)