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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P97000 MPORT & EXPORT, INC.	0028870 (8	3)					
Principal Plac	e of Business	Mailing Address		•••		1981/1981 110 (1931) 1881/1 88/11 88/11 88/11 88/11	101 IIIII IUN	
10853 SW 132ND CIRCLE COURT 10853 SW 132ND CIRCLE CO				t				
MIAMI FL 33186 MIAMI FL 33186								
						DO NOT WRITE IN THIS SPA	ACE	
						3. Date Incorporated or Qualified		
9 Principal P	Place of Business	2a. Mailing Address				03/28/1997 4. FEI Number		plied For
21	1000 01 00011000	<del>-</del> , ~	26			65-0746902	<del></del>	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	
22		27				5. Certificate of Status Desired	Fee Re	
City & Stat	te	City & State				6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	Added t	
Zip	Country	Zip	<b>⊢</b> —	ountry		8. This corporation owes or has paid the currer		
24	25	29	30			Personal Property Tax due June 30.		] No
	g, Name and Address of Curren	t Hegistered Agent		81	Name	10. Name and Address of New Registered Ag	ent	
	INTERO, MAIGEL A				1401110			
10853 SW 132ND CIRCLE COURT					Street Add	ress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33186				83				
				84	City	FL.	<b>85</b> Zip (	Code
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida, Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S</li> </ol>					-named corporation		nanging its itment as	s registered registered
SIGNATURE								
	Signature, typed or printed name of registered ager				nt aignature requi	red when reinstating) DATE	IDCOTOD	0 141 40
12.	OFFICERS AND DIRECTORS 13 PD DELETE 1.1		TITLE		ADDITIONS/CHANGES TO OFFICERS AND D	Change	Addition	
NAME	QUINTERO, MAIGEL A			1.2 NAME		_	1 - mingo	
STREET ADDRESS	10853 SW 132ND CIRCLE CO	URT		STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186	<b>5</b> ,,,		CITY-ST				
TITLE		DELETE	_	2.1 TRILE			Change	Addition
NAME			2.2	NAME				
STREET ADDRESS			2.3	STREET	ADDRESS			
CITY-ST-ZIP			2.4	2.4 CITY-ST-ZIP				
TITLE	DELETE 3.		TITLE			Change	☐ Addition	
NAME			3.2	NAME				
STREET ADDRESS			3.3	STREET	ADDRESS			
CITY-ST-ZIP	Dri Pre			3.4. CITY-ST-ZIP			100	- Landenin
TITLE	☐ DELETE			4.1 TITLE		L	Change	Addition
NAME				2 NAME				ļ
STREET ADDRESS				STREET A				
CITY-ST-ZIP TITLE			CITY-ST	- ZIP		Change	☐ Addition	
NAME		المالات في	- 1	NAME	1	<del>-</del>	_ withingo	
STREET ADDRESS				STREET A	ADDRESS			
CITY-ST-ZIP				CITY-ST				
TITLE		DELETE		TITLE			Change	Addition
NAME				NAME			•	
STREFT ADDRESS				STREET A	ADDRESS 1			

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 faceiver 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 chapter 607 and attachment with an address.

SIGNATURE: 1

2/24/98

**FILED** 

Mar 03 1998 8:00am

Secretary of State