

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

DOCUMENT # P97000030107 (1)

1. Corporation Name

2 MIL.IMP. & EXP., INC.



Principal Place of Business

Mailing Address

~~709-10TH STREET #14~~
~~MIAMI BEACH, FL 33139~~
~~MIAMI BEACH, FL 33139~~

~~709-10TH STREET #14~~
~~MIAMI BEACH, FL 33139~~
~~MIAMI BEACH, FL 33139~~

1770 NE 191TH STREET #510 BLDG. 1

NORTH MIAMI BEACH, FL 33179

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/02/1997

4. FEI Number

65-0741277

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~MACOMBE, LOUISIANA~~ PAULO F. DE OLIVEIRA

81 Name

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

83

84 City

FL

85 Zip Code

1770 NE 191 ST. #510 BLDG.

N. MIAMI BEACH, FL 33179

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

Paulo F. de Oliveira

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PAUL F. DE OLIVEIRA

STREET ADDRESS 709-10TH STREET #14

CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE ☐ DELETE

NAME VICE-PRESIDENT/TREASURER

STREET ADDRESS PAULO DE AZEVEDO

CITY-ST-ZIP 1770 NE 191 STREET #510 BLDG 1

TITLE ☐ DELETE

NAME ELIANE BENATTI ROCHEBOIS/SECRETARY

STREET ADDRESS 3145 NE 184TH STREET #5106

CITY-ST-ZIP AVENTURA, FL 33160

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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)(f), 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.

CR2E034 (10/97)