## 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 # P

P97000033560 (8)

EBM SYSTEM EXPORT, INC.

Principal Place of Business Mailing Address						B(11) \$41) (44)
7367 N.W. 54TH STREET		7367 N.W. 54TH STREET				
MIAMI FL 33166	MIAMI FL 33166			DO NOT WHITE	E IN THIS SPACE	
				3. Date Incorporated or Qualified		
				04/14/1997		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	/	Applied For
21	26			65-0743791		Not Applicable
Suite, Apt #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22	[27]				Fee I	Required
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	r <del>-</del> -1	O May Be d to Fees
Zip Cou		Count	ry	This corporation owes or has particular to the particular to		
24 25	29	30	•	Personal Property Tax due June	p, '	☐ No
	ress of Current Registered Agent			10. Name and Address of New Re		
VILLATE, FANNY L		В	1 Namo			
4112 SAPIRO HIRO T	FERRACE	A	2 Street Addr	ress (P.O. Box Number is Not Accepta	hle)	
WESTON FL 33314		ا	2 Street Addi	ress (F.O. DOX Nomber is Not Accepta	ыю	
		8	3			
			4 City		- 85 Zij	o Code
			City		FL  °°   <sup>2</sup> "	Code
11. Pursuant to the provisions of S	ections 607.0502 and 607.1508, Florida Sta oth, in the State of Florida. Such change wa	itutes, the abo	ve-named corp	poration submits this statement for the	purpose of changing	its registered
agent. I am familiar with, and a	out, in the state of Florida. South change was accept the obligations of, Section 607.0505,	Florida Statut	es.	non's board of directors. Thereby acce	1	is registered
SIGNATURE CXMM	Willatt R				1/6/98	
Signature, typed or printed n	ame of registered agent and title if applicable ()		gent signature requir	rod when reinstating)	DATE	=======================================
TRILE PD	OFFICERS AND DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFI		
1		1.1 TITLE			☐ Change	LJ AUUIIIOII
NAME VALLIATE, FANI		1.2 NAME				
STREET ADDRESS 4112 SAPIRO H		1	ET ADDRESS			l
TITLE VD	DELETE	1.4 CITY			Change	Addition
NAME RODRIGUEZ, G.		2.2 NAME			L Change	☐ Addition
STREET ADDRESS 4112 SAPIRO H						
MEATAN EL AS			ET ADDRESS			ŀ
TITLE SD	TO DELETE	2. 4 CITY 3.1 TITLE			Change	Addition
NAME CASTRO, LUZ I	<del></del>	3.2 NAME	<b>1</b>		— ≎nango	
STREET ADDRESS 7367 N.W. 54Th			FT ADDRESS			
CITY-ST-ZIP MIAMI FL 33166		3.4. CITY				
TITLE TD	DELETE	4.1 TITLE			Change	Addition
NAME CASTRO, LUIS	A	4. 2 NAM			•	
STREET ADDRESS 7367 N.W. 54TH		4.3 STRE/	ET ADDRESS			·
CITY-ST-ZIP MIAMI FL 3316		4.4 CITY	}			
TITLE	DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME		5.2 NAME	:			
STREET ADDRESS		5 3 S1 RE	ET ADDRESS			
CITY-ST-ZIP		5.4 CITY-	·S1 · ZiP			
TITLE	☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME		6.2 NAME	:			1
STREET ADDRESS		6.3 STRE	E1 ADDRESS			
CITY-ST-ZIP		6.4 CITY-	S1-ZIP			
	tion supplied with this filing does not qualify	y for the ever	ntion stated in	Section 119 07(3\(i) Florida Statutos J	further certify that the	o information

Thereby coming that the information supplied whit his hiring does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes, if 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 eath; 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 an attachment with an address.

SIGNATURE: C

Amm Villati R

1698

305,885,5004

**FILED** 

Jan 20 1998 8:00am

Secretary of State