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 # P97000047843 (2)

FILED Mar 23 1998 8:00am Secretary of State

MDC I	MPORT & EXPORT CO)RP. 			
Principal Plac	ce of Business	Mailing Address		1 JONESIANS IND CALLEL CONC. AND IN MAINT AREAS MAIN	(1 01011 1808) (B(1) 81889 1111 1861
4470 N.S. 12	MAD. CT	-1470 N.S. 123RD ST			
NORTH MIAMI FL COICE		#1102		DO NOT WRITE IN TI	HIS SPACE
		• ************************************	•	3. Date Incorporated or Qualified	
				05/30/1997	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
'	9 N.W. 36"	ST 26		65-0757590	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	4	 	\$8.75 Additional
22 2	30	27	.4/	5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State	<i></i>	6. Election Campaign Financing	\$5.00 May Be
3 MIN	MI - FL	28		Trust Fund Contribution	Added to Fees
7in	Country	Zip 9	Country	8. This corporation owes or has paid the	e current year Intangible
4 33	166 26	29	30	Personal Property Tax due June 30.	¥Yes □ No
	9. Name and Address of	Current Registered Agent		10. Name and Address of New Registe	red Agent
DE	E MORAES, MONICA L		61 Name		
	170 N.E. 123RD ST		62 Street Add	ress (P.O. Box Number is Not Acceptable)	
	1102		July Chroni Add	index (i.e. box rearrison to tree recorpitable)	
-	ORTH MIAMI FL 33161		83		
			84 City		
			84 City		FL 85 Zip Code
				poration submits this statement for the purpo- ution's board of directors. I hereby accept the	
SIGNATURE	Signature, typed or printed name of regi		authorized by the corporal torida Statutes. TE: Registered Agent elginature regul 13. 1.1 TITLE		TE
SIGNATURE	Signature, typod or printed name of region OFFICE	instered agent and tille if applicable (NOTERS AND DIRECTORS	TE: Registered Agent algnature requi	ired when reinstaling) DA	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typod or printed name of regi	RS AND DIRECTORS	TE: Registered Agent signature requi	ired when reinstaling) DA	AND DIRECTORS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typod or printed name of region OFFICE D	RS AND DIRECTORS DELETE	TE: Registered Agent alginature requi 13. 1.1 TITLE 1.2 NAME	ired when reinstaling) DA	AND DIRECTORS IN 12
SIGNATURE 12. TIILE	Signature, typod or purified name of region of FFICE D OASTRO, RENATO O 1470 N.E. 129RD OT	RS AND DIRECTORS DELETE	TE: Registered Agent eignature requi	olred when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typod or purified name of region of FFICE D	RS AND DIRECTORS DELETE 11102 DELETÉ	TE: Registered Agent eignature requi	ired when reinstaling) DA	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	Signature, typod or purified name of reg. OFFICE D OASTRO, RENATO O 1470 N.E. 129RD OT A NORTH MIAMI FL 8816	RS AND DIRECTORS DELETE 11102 DELETÉ	TE: Registered Agent eignature requi	olred when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typod or purified name of reg. OFFICE D OASTRO, RENATO O 1470 N.E. 129RD ST NORTH MIAM! FL 8816 DE MORAES, MONICA	HAND DIRECTORS DELETE HAND DIRECTORS DELETE L HAND DIRECTORS DELETE L HAND DIRECTORS	TE: Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	olred when reinstating) DA ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE NAME	Signature, typod or purited name of region of FFICE D	HAND DIRECTORS DELETE HAND DIRECTORS DELETE L HAND DIRECTORS DELETE L HAND DIRECTORS	TE: Registered Agent eignature requi 13. 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. CITY - ST - ZIP 3.1 LTLE	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1	TE: Registered Agent eignature requi 13. 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. CITY - ST - ZIP 3.1 LTLE	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE TITLE TITLE TITLE	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1	TE: Registered Agent algnature required in the second seco	ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L MORAES, MAPCI	AND DIRECTORS IN 12 Change Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1 DELETE	TE: Registered Agent algnature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1	TE: Registered Agent algnature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCILL TO NE 123 ST FILE MIAMI - FL 73161	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1 DELETE	TE: Registered Agent algnature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L R MORAES, MAPCILL AND DE 123 ST 4-116 MIAMI- FL 73161	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1 DELETE	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP	Signature, typod or purited name of region of FFICE D	Instance agent and tille if applicable (NOTERS AND DIRECTORS) I DELETE I 1102 B1 DELETE	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L R MORAES, MAPCILL AND DE 123 ST 4-116 MIAMI- FL 73161	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent algneture required in the second in t	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition Addition Addition Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	Signature, typod or purited name of region of FFICE D	THE PROPERTY OF THE PROPERTY O	TE: Registered Agent signature required in the second seco	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES TO OFFICERS E MORAES, MONICA L B MORAES, MAPCIL AT OUE 12 5 7 7 116 AT QUES, TARYA 5	AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Change Addition Addition Addition Addition Addition

Insereby certify that the information supplied with this himp-does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the informatio indicated on this annual report or supplemental arrival report is the end 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 receipt 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 attackment with an eddress.

GNATURE:

SIGNATURE: *

20 98