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 # P97000047846 (5)

MAKRO AMERICA, INC.

Principal Place of Business

Mailing Address

FILED May 07 1998 8:00am Secretary of State



14390 SW 97 LANE 14390 SW 97 LANE MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/23/1997 FEI Number 672 5 9 2. Principal Place of Business 2a. Mailing Address Applied For 7820 SW 196 Terr 196 Terr Not Applicable 7820 SW Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing FloridA Œ L MIAMI Added to Fees Trust Fund Contribution Country A Country 8. This corporation owes or has paid the current year Intangible zip 3 189 3184 USA Yes Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CUNEO, Eguardo CUNEO, CESAR EDUARDO Street Address (P.O. Box Number is Not Acceptable) **7820 SW 198 TERRACE MIAMI FL 33189** 83 CityMIAMI 84 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. ne of registered agrint and little if applicable (NOTF: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. VICE President Change DELETE TITLE 1.1 TITLE CUNEO, CESAR Eduardo DEL ROCIO SANCHO, FATIMA 1.2 NAME NALIF 7820 50 14390 SW 97 LANE 1.3 STREET ADDRESS 196 STREET ADDRESS MIAMI MIAMI FL 33186 14 City-St-7/P CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change ___ Addition DELETE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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)(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 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 of the corporation of the cor

SIGNATURF:

April 3,1998 305-9718926