2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700053851

| . Entity Name CYM IMP(| ORTS & EXPORTS CORP | 5 . | | May 02, 2000 8:00 Secretary of State | an e |
|--|---|--|--|---|----------------|
| Principal Place | of Business | Mailing Address | | 03-04-2000 90113 001 ***150.00 | |
| CONE RD | | 2100 N ATLANTIC AVE | | | |
| 4 ISLAND | FL 32952 | APT 709 COCOA BEACH FL 32931- | 5061 | | |
| · | re 32302 | US | 3001 | CARDIDA NA MANA MANA MANA MANA MANA MANA MINA MI | |
| . Principal Pla | ace of Business | 3. Mailing Address | | | |
| Suite, Apt. #, etc. | | College And Market | | | |
| | | Suite, Apt. #, etc. | | DO NOT WRITE IN THIS SPACE FET NUMBER 59-3458257 | |
| City & State | | City & State | | 4. FEI Number APPLIED FOR Applied For Not Applied be | - |
| Zio | Country | Zip | Country | 5. Certificate of Status Desired See Required Fee Required | 1 |
| | 6. Name and Address of Cur | rent Registered Agent | | 7. Name and Address of New Registered Agent | 1 |
| <u>۔</u> | | | Name | | 1 |
| | EL, RICHARD H N ATLANTIC AVE | | Street Addres | ss (P.O. Box Number is Not Acceptable) | 1 |
| APT 7 | | | \ | | ┪ |
| | DA BEACH FL 32931 | | | | _ |
| | | | City | FL Zip Code | |
| | Signature, typed or printed name of registered ration is eligible to satisfy its Intar | | OTE: Registered Agent signature requ | guired when reinstating) DATE | |
| Tax filing re | equirement and elects to do so. | After MAY 1, 2 | 2000 Fee will be \$550.00 able to Department of S | | |
| 11. | | AND DIRECTORS | 12. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| RITLE NAME STREET ADDRESS DITY-ST-ZIP | D TEMPEL, RICHARD H 2100 N. ATLANTIC AVE., #7 COCOA BEACH FL 32931 | ☐ Delete | TITLE NAME STREET ADDRESS CHY-ST-ZIP | ☐ Change ☐ Addition | CR2E034 (9/99) |
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| STREET ADDRESS City-ST-Zip | | | STREET ADDRESS | | } |
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| STREET ADDRESS | | | STREET ADDRESS | | |
| CITY-ST-ZIP | ļ | | CITY-ST-ZIP | _ | |
| indicated of the cor | on this report or supplemental re poration or the receiver or trustee , or on an attachment with an add | port is true and accurate and the e empowered to execute this repo dress with all other like empower | at my signature shall have to ort as required by Chapter ed. | in Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director of 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if | |

OGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SECTE 1213

FILED