FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700055038

1. Corporation Name

EXPORT AND DISTRIBUTION, INC.

Principal Place of Business Mailing Address 353 W. 47TH STREET. SUITE 5-A MIAMI BEACH FL 33140-3104 MIAMI BEACH FL 33140-3104					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
						06/21/1997 4. FEI Number		alical For	
	ace of Business	—	2a. Mailing Address				Applied For Not Applicable		
21	# -1-	Suite, Apt. #, etc.				65-0763147	\$8.75 A		
Suite, Apt. #, etc.		-				5. Certifcate of Status Desired	Fee Red	L.	
City & State			27 City & State			6. Election Campaign Financing	\$5.00	May Bo	
		28	⊢¬ ′			Trust Fund Contribution	Added to		
23 Zip	Country		Zip Counti			8: This corporation owes the current year intangible			
24	25	29	30]		Personal Property Tax. ☐ Yes ☐ No			
9. Name and Address of Current Registered Age				' 	10. Name and Address of New Registered Agent				
				81	Name				
PIPOLI, EDUARDO				82	Change A	ddress (P.O. Box Number is Not Acceptable)			
353 W. 47TH STREET, SUITE 5-A				62	Street At	duress (P.O. Box Number is Not Acceptable)			
MIAMI BEACH FL 33140-3104				83					
					City 85 Zip Code				
				84	- 7	FL	'		
office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such cha	ange was autho	orized by	the corpora	orporation submits this statement for the purpose of cation's board of directors. I hereby accept the appoin	hanging its tment as reg	registered jistered	
SIGNATURE						using when reinstating) DATE			
				jistered Ager 13.	nt signature requ	(uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	DIRECTO	RS IN 12	
12.			DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
TITLE									
NAME	1 II CLI, EDOMINO		1.2 NAME						
STREET ADDRESS	555 11 11 11 51 14 1 5 11		1.3 STREET						
CITY-ST-ZIP	MIAMI BCH FL 33140-3104		1.4 CITY-ST-ZIP		VS	XXChange	Addition		
TITLE	VS			2		PIPOLI, JUAN SALVADOR	A Containing o		
NAME	PIPOLI, JUAN SALVADOR			2.2 NAME		400 LOCK RD. APT. 2			
STREET ADDRESS	219 NE 14 AVE APT 504			2.3 STREE				1	
CITY-ST-ZIP	HALLANDALE FL 33009		DELETE	2. 4 CITY-S	T-ZIP	DEERFIELD BEACH FL 33442	Change	☐ Addition	
TITLE		Ų	DELETE	31 TITLE			Change		
NAME	•			3.2 NAME				1	
STREET ADDRESS				3.3 STREET	1				
CITY-ST-ZIP			DELETE	3.4. CITY- S	IT-ZIP		Change	Addition	
TITLE		Ц	DELETÉ	4.1 TITLE					
NAME				4. 2 NAME					

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 suppliemental 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 received or trusted 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 attactment with an address, with all other like empowered.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

APRIL 19, 1999

305-673-2935

Change

Change

☐ Addition

Addition

May 06, 1999 8:00 am Secretary of State

05-06-1999 90188 026 ***150.00