

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000056676 (4)

1. Corporation Name

CHINA MADE WORLDWIDE DISTRIBUTION, INC.

Principal Place of Business

6801 SW 48TH ST  
MIAMI FL 33155

Mailing Address

6801 SW 48TH ST  
MIAMI FL 33155

2. Principal Place of Business

21 7033 SW 47 ST  
Suite, Apt. #, etc.

2a. Mailing Address

26 7033 SW 47 ST  
Suite, Apt. #, etc.

City & State

23 Miami, FL

City & State

27 Miami, FL

Zip

24 33155

Country

25 USA

Zip

29 33155

Country

30 USA

9. Name and Address of Current Registered Agent

OLLOQUI, JUAN J  
6801 SW 48TH ST  
MIAMI FL 33155

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

P OLLOQUI, JUAN J  
6801 SW 48TH ST  
MIAMI FL 33155

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TITLE NAME STREET ADDRESS CITY-STATE-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 with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3. Date Incorporated or Qualified

06/27/1997

4. FFI Number

650769018

Applied For

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30

Yes No

10. Name and Address of New Registered Agent

SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

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