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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000062206 (2)

IMPORTADORA COSTARRICENSE, INC.

FILED May 11 1998 8:00am Secretary of State



Disabal Disa	of Dunings	Mailing Address		··· ———	
Principal Place		<u>-</u>			
7751 SW 26 STREET 7751 SW 26 STREET MIAMI FL 33155 MIAMI FL 33155					
MIAMI FL 33155		MIRMI PE 33133			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					07/17/1997
2. Principal Pl	ace of Business	2a. Mailing Address			4. FELNumber Applied For
21		26 10125 NW 9TH ST. CIR		· 21.C	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22		27 204			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28 / / / / / / / /		 	Trust Fund Contribution
Zip	Country	-1 12	Cour	3172	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes XV No
24	25	[29] 7	30 5	ישוינ	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
81 Namo					
	TIZ, NANCY				
	1 S W 26 ST			82 Street	et Address (P.O. Box Number is Alet Acceptable)
MAIMI FL 33155				83 1 <i>01</i>	125 NW 914 ST. CIE. 4204
			ļ	83	
			Ì	84 City	M (AM) FL 85 Zip Code 33/56
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida Stat	utes, the ab	ove-named Thy the cor	ed corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
agent La	n fam iliar with, and accept the oblic	gations of, Section 607.0505, I	Florida Stati	ites.	,
SIGNATURE					
Olditations	Signature, typest or protect name of registered as			Agent signature	ture required who i reinstalling) DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	P	☐ DELETE	1.1 117		
NAME	BUSTOS, ROCIO		1.2 NA		
STREET ADDRESS	1275 SW 13 ST		1.3 \$1	REET ADORESS	S
CITY-ST-ZIP	MIAMI FL 33145			Y - ST - ZIP	M€ Change Addition
TITLE	VS	DELETE	2.1 TIT		Change Addition
NAME	ORTIZ, NANCY		2.2 NA	ME	
STREET ADDRESS	7751 SW 26 STREET		2.3 ST	reet address	10125 NW 914 ST-CIR # 204 miami # 33172
CITY-ST-ZIP	MIAMI FL 33155		2.40	TY-ST-ZIP	miami 72 33172
TITLE		☐ DELETE	3111	LE	Change Addition
NAME			3 2 NA	ME	
STREET ADDRESS			3.3 ST	reli address	as
CITY-ST-ZIP			3.4. C	TY-ST-ZIP	
TITLE		DELETE	4.1 11	LF	Change Addition
NAME	·		4. 2 N	AME	
STREET ADDRESS			4.3 ST	reet address	22
CITY-ST-ZIP			4.4 Cf	TY - ST - ZIP	
TITLE		DELETE	5.1 TI		Change Addition
NAME			5.2 NA	ME	
STREET ADDRESS			5 3 S1	REET ADDRESS	ss
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	61 TF		Change Addition
NAME			6.2 N/	ME	
STREET ADDRESS				REET ADDRESS	SS
OUTV OT TIE			6.4 CI	TY - ST - 71P	
CITY-\$1-ZIP	certify that the information supplied	with this filing does not qualify	y for the exe	emption stat	tated 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 corporator) in 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 to execute the same that my name appears in the corporator of the