

FILED

Jul 14 1998 8:00am

Secretary of State

FROM: ARGENTINA DEPT. OF STATE

850-488-9000

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

PROFIT
CORPORATION
ANNUAL REPORT
1998FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # P97000073683
1. Corporation Name
Fancy Products Inc.Principal Place of Business
13021 SW 122 Ave
Miami FL 331862. Principal Place of Business
2a. Mailing Address
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25 Suite, Apt. #, etc.
26 City & State
27 Zip
28 Country9. Name and Address of Current Registered Agent
ARAZOZA, COMAS, DETORRES & FERNANDEZ FRAMA
101 MADEIRA Ave.
CORAL GABLES, FL. 33134

11. Pursuant to the provisions of Sections 607.01, 607.02 and 607.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent to 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P/K/D	Elnira Mastandrea	13021 SW 122 Ave	Miami FL 33186	☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	☐
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	☐
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	☐
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	☐
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	☐
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	☐

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-07/14/98-01093-044

FILING FEE \$550.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(6)(b), 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

CR2E034 (1/05/97)