

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

FILED

Jul 16 1998 8:00am

Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000075256  
1. Corporation Name  
VENE-RABBIT INTERNATIONAL, Import and Export Inc.

Principal Place of Business: 10242 NW 47th Suite #12, Sunrise, FL 33357  
Mailing Address: 10242 NW 47th Suite #12, Sunrise, FL 33357

DO NOT WRITE IN THIS SPACE  
3. Date Incorporated or Qualified: 08/29/1997

21	2. Principal Place of Business	26	2a. Mailing Address
	10242 NW 47th Suite # 12		10242 NW 47th Suite # 12
22	City & State	27	City & State
	Sunrise, Florida		Sunrise, Florida
24	Zip	29	Zip
	33357		33357
25	Country	30	Country
	USA		USA

4. FEI Number: 65-0833907  
Applied For: Not Applicable  
5. Certificate of Status Desired:  \$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

9. Name and Address of Current Registered Agent  
HERNAN, Adolfo  
9360 NW 40th Court  
Sunrise, FL 33357

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
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 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (Signature) \_\_\_\_\_ (Printed Name) \_\_\_\_\_ (Registered Agent's Signature) \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS

TITLE	PP	<input type="checkbox"/> DELETE
NAME	HERNAN Adolfo	
STREET ADDRESS	9360 NW 40th Court	
CITY-ST-ZIP	Sunrise, Florida 33357	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

600002590556  
-07/16/98--01048--006  
\*\*\*150.00

14. I hereby certify that the information supplied was true and correct and that I am an officer or director of the corporation 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 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 and that my signature shall have the same legal effect as if made under oath.

SIGNATURE: \_\_\_\_\_ (Signature) \_\_\_\_\_ (Printed Name) \_\_\_\_\_ (Date) \_\_\_\_\_ (Filing Fee)

CR2E034 (10/97)

2

Adolfo G. Herrera P.H. 954-5720849 83-643/670 00667 588  
 Josefa A. Yell Date 4/20/73

Pay to the Order of Adolfo Herrera \$ 150.00  
 One hundred fifty and 00/100

FIRST National Bank  
 Information Service

For 100007056  
 Dated 06/29/73

⑈067006432⑈1090007022582⑈0588