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

PROFIT FLORIDA DEPARIMENT OF, STATE CORPORATION FILED Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 JUN 15 PM 3: 09 DOCUMENT # P97000081986 (6) SECRETARY OF STATE TALLAHASSEE, FLORIDA FEDERAL EXPORT MANAGEMENT CORPORATION Principal Place of Business Mailing Address 7370 NW 36 STREET 7370 NW 36 STREET SUITE 325-G SUITE 325-G DO NOT WRITE IN THIS SPACE MIAMI FL 33166 MIAMI FL 33166 3. Date Incorporated or Qualified 09/19/1997 2. Principal Place of Business 2a. Mailing Address 26 P.O. BOX 524090 Applied For STREET Not Applicable Suito, Apt. #, etc \$8.75 Additional 囟 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 29 33152 Yes Personal Property Tax due June 30. 25 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ESPINOSA, DIEGO A 15108 SW 104 ST #716 82 Ree T **MIAMI FL 33196** 83 City 84 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, typod or printed name of registered agent and title if applicable (NOT). Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PRASIDENT Change Addition DELE1E TITLE 1.1 TITLE 900002566589-Guillermo NAME 1.2 NAME -06/19/98--01113--017 STREET 9321 SW 1.3 STREET ADDRESS STREET ADDRESS ****158.75 ****158.75 1.4 DITY - ST - ZIP CITY-ST-2IP DELETE Change Addition TITLE 21 11TLE 2.2 NAME NAME SW 4 street 227 STREET ADDRESS 2.3 STREET ADDRESS miami | P1 37174 CITY-ST-ZIF 2 4 CITY-ST-ZIP DELETE Change Addition 3 1 THEF TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP [__ Change Addition DELLIE TITLE . 4.1 THILE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE L. Change ___ Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - S1 - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 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 it changed, or on an attachment with an address.