Applied For

\$8.75 Additional

Fee Required\_

\$5.00 May Be

Added to Fees

ΠNo

Not Applicable

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

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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**PROFIT** CORPORATION -ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## 1999 DOCUMENT # **P97000081986**1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

24

Zip

FEDERAL EXPORT MANAGEMENT CORPORATION

Country

9. Name and Address of Current Registered Agent

25

ESPINOSA, DIEGO A

9321 SW 4 STREET

rincipal Place of Business	Mailing Address
21 SW 4 STREET	P.O. BOX 524090
PT. #227 IAMI FL 33174	MIAMI FL 33152

## Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90107 035 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed 09/19/1997 4. FEI Number

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

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

65-0783020

NAME	API	#221	83					
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; am femiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.    SIGNATURE	MIAI	AI FL 33174		and the same of the same of the same of	* 4	<u> </u>		
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 and ramiliar with, and accept the follogations of Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed riame of registered agent and tile if applicable.   International properties of the properties of			84 City		FL 85 Zip C	ode		
Signature, hypot or printed name of registering agent and title if applicable. (NOTE: Registered Agents agrintature registered Agents agrintative ag	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							
12.								
NAME			13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12		
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STREET ADDRESS   9321 SW 4 STREET, #227	NAME	ESPINOSA, GUILLERMO	1.2 NAME	<b>-</b>		ļ		
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Country

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indicated on this annual report or supplied with 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