SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # 1. Corporation Name SANEMM EXPORTS L

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

COCUMENT # P97000088558 (6) SANEMM EXPORTS USA, INC.

FILED Aug 13 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 1390 S. DIXIE HWY. 1390 S. DIXIE HWY. **SUITE 2106 SUITE 2106** DO NOT WRITE IN THIS SPACE CORAL GABLES FL 33146 CORAL GABLES FL 33146 3. Date Incorporated or Qualified <u> 10/14/1997</u> 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 29 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BALLESTAS, ISABELLE 1390 S. DIXIE HWY. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 2106 A3** CORAL GABLES FL 33146 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034 (5/98) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE DELETE Change Addition NAME BALLESTAS, ISABELLE 1.2 NAME STREET ADDRESS 1390 S. DIXIE HWY., SUITE 2106 1.3 STREET ADDRESS CITY-ST-ZIP **CORAL GABLES FL 33146** 1.4 CITY-ST-ZIP 2.1 TITLE TITLE DELETE Change Addition NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE Change ___ Addition 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

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 Addition

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5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

4.1 TITLE

4 2 NAME

51 TITLE

5.2 NAME

DELETE

DELETE

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 if changed, or compared to the same true of the corporation of the corporation of the same appears in Block 12 or Block 13 if changed, or compared to the same true of the corporation of the corporation of the corporation of the same true of the

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

NAME STREET ADDRESS

29/JULY/ '98 (305) 662-2548.

Change

Change Addition

Addition