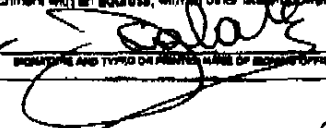


FILED
Jun 14, 2004 8:00 am
Secretary of State

05-03-2004 90736 025 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT (AR)**

5/3/2

DOCUMENT # P97000090178																																						
1. Entity Name BUSINESS & IMPORT, INC.																																						
Principal Place of Business 1149 S.W. 27TH AVENUE STE. 305 MIAMI FL 33135		Mailing Address 1149 S.W. 27TH AVENUE STE. 305 MIAMI FL 33135																																				
2. Principal Place of Business 1149 SW 27th Ave Ste. Apt. #, etc. 205		3. Mailing Address 1149 SW 27th Ave Ste. Apt. #, etc. 205																																				
City & State MIAMI FL		City & State MIAMI FL																																				
Zip 33135 Country USA		Zip 33135 Country USA																																				
4. FEI Number 65-0823051		Applied For ☐ Not Applicable																																				
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																																				
6. Name and Address of Current Registered Agent DEL VALLE, FRANCISCO L 1149 SW 27 AVE., SUITE 305 MIAMI FL 33135		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1149 SW 27th Ave #205 City MIAMI FL Zip Code 33135																																				
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and dated acceptable. NOTE: Registered Agent signature required when re-electing.																																						
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																						
10. OFFICERS AND DIRECTORS <table border="1"> <thead> <tr> <th>TITLE</th> <th>NAME</th> <th>STREET ADDRESS</th> <th>CITY-ST-ZIP</th> <th>☐ Delete</th> </tr> </thead> <tbody> <tr> <td>PD</td> <td>SALAS, JOSE</td> <td>1149 SW 27 AVE., SUITE 305</td> <td>MIAMI FL 33135</td> <td></td> </tr> <tr> <td>STD</td> <td>BARRANAO MARQUEZ, MARIA ANGELICA</td> <td>1149 SW 27 AVE., SUITE 305</td> <td>MIAMI FL 33135</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Delete</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Delete</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Delete</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Delete</td> </tr> </tbody> </table>				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	PD	SALAS, JOSE	1149 SW 27 AVE., SUITE 305	MIAMI FL 33135		STD	BARRANAO MARQUEZ, MARIA ANGELICA	1149 SW 27 AVE., SUITE 305	MIAMI FL 33135						☐ Delete					☐ Delete					☐ Delete					☐ Delete
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1"> <thead> <tr> <th>TITLE</th> <th>NAME</th> <th>STREET ADDRESS</th> <th>CITY-ST-ZIP</th> <th>☒ Change ☐ Addition</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>1149 SW 27th Ave STR 205</td> <td>MIAMI FL 33135</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>☐ Change ☐ Addition</td> </tr> </tbody> </table>				TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change ☐ Addition			1149 SW 27th Ave STR 205	MIAMI FL 33135						☐ Change ☐ Addition					☐ Change ☐ Addition					☐ Change ☐ Addition					☐ Change ☐ Addition					
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information. SIGNATURE:  DATE: JUNE 10/04 Signature and typed or printed name of officer or director on declaration																																						

66427797



MOORE CR22034 (11/03)

JOSE SALAS, PRESIDENT