

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

FILED
Feb 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000097513 (0)**
1. Corporation Name
AGRODCA EXIMPORT CORPORATION



Principal Place of Business 10851 N.W. 9TH COURT PLANTATION FL 33324	Mailing Address 10851 N.W. 9TH COURT PLANTATION FL 33324
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8201 N.W. 66 Street Suite, Apt. #, etc 22 10 City & State 23 Miami, FL Zip 24 33166		2a. Mailing Address 26 8201 N.W. 66 Street Suite, Apt. #, etc 27 10 City & State 28 Miami, FL Zip 29 33166		3. Date Incorporated or Qualified 11/17/1997	
25 U.S.		30 U.S.		4. FEI Number 65-0794499	
2. Principal Place of Business		2a. Mailing Address		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
21 8201 N.W. 66 Street		26 8201 N.W. 66 Street		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
22 10		27 10		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
23 Miami, FL		28 Miami, FL			
24 33166		29 33166			
25 U.S.		30 U.S.			

9. Name and Address of Current Registered Agent

CAMEJO, ANTONIO
10851 N.W. 9TH COURT
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name Antonio Camejo
82 Street Address (P.O. Box Number is Not Acceptable) 11201 S.W. 1st Court
83
84 City Plantation
85 Zip Code FL 33325

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 typed or printed (once of registered agent and filed if applicable)

(NOTE: Registered Agent signature required when reinstating)

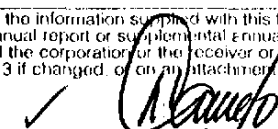
02-20-98.

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CAMEJO, ANTONIO 10851 N.W. 9TH COURT PLANTATION FL 33324	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 11201 S.W. 1st Court Plantation, FL 33325
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD CAMEJO, CARMEN 10851 N.W. 9TH COURT PLANTATION FL 33324	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 11201 S.W. 1st Court Plantation, FL 33325
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD CONSTANTINIDIS, MARI SILVA 10851 N.W. 9TH COURT PLANTATION FL 33324	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information submitted 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 on an attachment with an address.

SIGNATURE:



02-20-98. (954) 9161275

CR2E034 (10/97)