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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000098727 (5)

EDMANSFORT USA IMPORT - EXPORT INC.

FILED Jan 29 1998 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address		
3 HARGROVE GRADE 3 HARGROVE GRADE				
PALM COAST FL 32137		PALM COAST FL 32137		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				11/17/1997
	Place of Business	2a. Mailing Address	11	4. FEI Number Applied For 59-34 80/34 Not Applied For
	E, HWY 100	20 62 0 0	HWY 100	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Sa.75 Additional Fee Regulred
City & Stat		City & State		
23 Bunn		28 Bunnell F	<u>-</u> L	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 3211	O 25	29 32110	30	Personal Property Tax due June 30. Yes No
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
NA NA	itelson, andrew G		81 Name	
418	2 S. CENTRAL AVENUE		82 Street	Address (P.O. Box Number is Not Acceptable)
FLO	GLER BEACH FL 32136			
			83	
			84 City	85 Zip Code
				corporation submits this statement for the purpose of changing its registered
SIGNATURE	213	n and title if applicable (NOTE	Registered Agent signature	poration's board of directors. I hereby accept the appointment as registered required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OF TOLING AND	DELETE	1.1 TITLE	Change Addition
NAME	FORTI, JOSE EDMANS		1.2 NAME	/
STREET ADDRESS	2013 NORTH DAYTONA AVE.		1.3 STREET ADDRESS	3 Hembury Lane
CITY-ST-ZIP	FLGLER BEACH FL 32136		1.4 CITY-ST-ZIP	Palm Coast FL 32137
TITLE		DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY - ST - ZIP	
TITLE		☐ DELETE	3.1 TITLE	Change Addition
NAME	-		3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Change Addition
TITLE		I I INCLETE		
NAME		☐ DELETE	4.1 TITLE	
APARAS		☐ DELETE	4. 2 NAME	
STREET ADDRESS		☐ DELETE	4. 2 NAME 4.3 STREET ADDRESS	
CITY-ST-ZIP		- ,	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	□ Change □ Addition
CITY-ST-ZIP TITLE		☐ DECETE	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME		- ,	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		- ,	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DECETÉ	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		☐ DECETÉ	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DECETÉ	4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to excurate and that my signature shall have the same legal offect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to except 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 analysis.

JAN 22 98