

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90088 046 ***150.00

DOCUMENT # P97000102874

1. Corporation Name
MIAMI EXPORT & COMPUTER SERVICE CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
9300 S DIXIE HWY
SUITE 202
MIAMI FL 33156
US

Mailing Address
9300 S DIXIE HWY
SUITE 202
MIAMI FL 33156
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

3. Date Incorporated or Qualified
12/04/1997

4. FEI Number
65-0797912

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ABIDO, CARLOS R
9300 S DIXIE HWY
SUITE 202
MIAMI FL 33156

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PSD** ☒ DELETE
NAME **VIEIRA, HAYTON**
STREET ADDRESS **9960 SW 106 AVENUE**
CITY-ST-ZIP **MIAMI FL 33176**

1.1 TITLE **PD Dirceu Dias Baptista** ☐ Change ☒ Addition
1.2 NAME **9280 SW 123 CT #403, Bldg S**
1.3 STREET ADDRESS **Miami, FL 33186**
1.4 CITY-ST-ZIP

TITLE **VPT** ☒ DELETE
NAME **GUELERO, ELCIO**
STREET ADDRESS **9300 S DIXIE HWY SUITE 202**
CITY-ST-ZIP **MIAMI FL 33156**

2.1 TITLE **VD Julio Cesar Pinto** ☐ Change ☒ Addition
2.2 NAME **9280 SW 123 CT #403, Bldg S**
2.3 STREET ADDRESS **Miami, FL 33186**
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE **VD Ernani Carvalho** ☐ Change ☒ Addition
3.2 NAME **15780 SW 106 Ter. #305 Bldg 13**
3.3 STREET ADDRESS **Miami, FL 33196**
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28

305-670-1990

CR2E034 (11/98)