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 # 1. Corporation Name P97000103366 (5)

DREAM EXPORT, CORP.

FILED May 13 1998 8:00am Secretary of State

|--|--|--|--|

Principal Plac	e of Business	Mailing Address			a ine tinest tie initit ineste mastit detitt datibt isesti	TREBO MINTO COMO OTHER MAIN MENT
8101 NW 271	TH STREET	8101 NW 27TH STREET				
#04 #04 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 3		#04 Coral Springs FL 330	10E		DO NOT WRITE IN THIS SPACE	
COTAL OF III	MOS 72 3000	COUNT SCHILLOS LE SX	703		3. Date Incorporated or Qualified	3 OFACE
					12/08/1997	
	lace of Business	2a. Mailing Address			4. FEI Number 65-0797853	Applied For
21		26			65-0131000	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		27				Fee Required
23	u	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip Country			Added to Fees	
24	25	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curren		1901		10. Name and Address of New Registers	
SP	INA. JETER L		81	Name		
	01 NW 27TH STREET		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
#0	-			Stibet Add	iress (F.O. Box Number is Not Acceptable)	
i d	ORAL SPRINGS FL 33065		63			
			84	City	F	85 Zip Code
Office of r	to the provisions of Sections 607.0502 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was a	authorized by	the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its societored
SIGNATURE	the transfer and transfer and transfer	110 15 th, 555 16 1 601 3656, 1 1	Ondit Gialdici		*	
	Signature, typed or pointed name of registered ager	nt and trie if applicable (NOI	F Registered Age	nt signature requ	ired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	SPINA, JETER L		1.2 NAME			
STREET ADDRESS	8101 NW 27TH STREET		1 3 STREET	ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY+S	T-ZIP		
TITLE	VPS	[_] DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	SPINA, JETER L		2.2 NAMÉ			
STREET ADDRESS	8101 NW 27TH STREET CORAL SPRINGS FL 33065		2.3 STREET]		
City-St-ZiP	CONAL OFMINGS PL 33003	I Delete	2. 4 CITY - S	ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	anabras		
STREET ADDRESS			3.3 STREET	i		
CITY-ST-ZIP TITLE	***	DELETE	3.4. CITY-S 4.1 TIBLE	11 - ZIP		Change Addition
NAME		Peerle	1	ĺ		_ J.ogo,
STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S			
TITLE		DELETE	5.1 TITLE	i · zir		☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S			
TITLE	12.00.00	DELETE	6.1 TITLE	1-211		Change Addition
NAME			6.2 NAME			·· • —
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-S			
	ordin that the information constitution	th this films door not sunlike f			Section 119 07/3)(i) Florida Statutes I further	cortify that the information

report carry that the information supplied with this timing does not quality for the exemption stated in Section 1.19.07(5)(f), Florida Statutes. Interfer bettly that the information indicated on this annual report or supplimental 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.

1998 (959) 752.6598