## 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

## Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90094 020 \*\*\*150.00

DOCUMENT #	D07000400000
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1. Corporation.Name\_

DREAM EXPORT, CORP.								
Principal Place of Business	Mailing Address			Ţ	1 (48)(84) (18 18))) 180() 8\$))) 40)			11112 Attle 2111 (88)
8101 NW 27TH STREET					DO NOT WRITE IN THIS SPACE			
				3.	Date Incorporated or Qualifed 12/08/1997			
2. Principal Place of Business	2a. Mailing Address			4.	FEI Number		Ц	Applied For
21 8180 PORAL BLYD	26 SAME				<u>65-0797853</u>			Not Applicable
Suite, Apt. #, etc. 22 Suite 405	Suite, Apt. #, etc.			5.	Certifcate of Status Desired		• -	5 Additional Required
City & State  23 MIAMI FL	City & State			6.	Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
Zip Country 24 33/66 25 V.S.A	_	untry		8.	This corporation owes the curre Personal Property Tax.	ent year Int	angible	□No
g Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
		81	Name					
SPINA, JETER L 8101 NW 27TH STREET		82	Street Addre	ess (P.O. Box Number is Not Acceptable)				
#04		83						
CORAL SPRINGS FL 33065		84	City		-	FL	85 2	Zip Code
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligations.	e of Florida. Such change was authorize	d by	the corporation	oration n's bo	n submits this statement for the pard of directors. I hereby accept	purpose of t the appoi	changing ntment a	its registered s registered

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13, DELETE Change 1.1 TITLE TITLE SPINA, JETER L 1.2 NAME NAME 8101 NW 27TH STREET 1.3 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change **VPS** ☐ DELETE 2.1 TITLE TITLE SPINA, JETER L 2.2 NAME NAME 8101 NW 27TH STREET 2.3 STREET ADORESS STREET ADDRESS **CORAL SPRINGS FL 33065** 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE. ☐ Change TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE. ☐ Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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:

CITY-ST-ZIP