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

DOCUMENT # P98000007819

1. Corporation Name

SIMPLE EXPORT, INC.

Principal Place of Business

Mailing Address

FILED Mar 11, 1999 8:00 am **Secretary of State**

03-11-1999 90174 011 ***150.00



4440 NW 9TH STREET NO. 6 Miami Fl 33126		4440 NW 9TH STREET NO. 6 MIAMI FL 33126			DO NOT WRITE IN THIS SPACE				
		·			3.	Date Incorporated or Qualifed 01/26/1998			
2. Principal Place o	f Business	2a. Mailing Address 26			4.	65-0807050		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	⊢		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country 25	Zip Co 29 30	— · · · · · · · · · · · · · · · · · · ·			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					
RODRIGUEZ, MELVIN 4440 NW 9TH STREET NO. 6 MIAMI FL 33126			81 82 83	82 Street Address (P.O. Box Number is Not Acceptable)					
	·		84	'		F			
office or registe	red agent, or both, in the Sta	0502 and 607.1508, Florida Statutes, the ate of Florida. Such change was authorize igations of, Section 607.0505, Florida Sta	d by	the corporation	ratio 's b	n submits this statement for the purpose of oard of directors. I hereby accept the app	of chang pintment	ing its registered as registered	

SIGNATURE (NOTE: Registered Agent signature required Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ☐ Change ☐ Addition □ DELETE TITLE 1.1 TITLE RODRIGUEZ. MARIA ESTHER 1.2 NAME NAME 4440 NW 9TH STREET NO. 6 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33126** CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ Addition Change DELETE 2.1 TITLE TITLE 22 NAME RODRIGUEZ, MELVIN NAME 4440 NW 9TH STREET NO. 6 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33126 - --2.4 CITY-\$T-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE **VPD** TITLE ZELAYA, LUIS H 3.2 NAME NAME 4440 NW 9TH STREET NO. 6 3.3 STREET ADDRESS STREET ADORESS MIAMI FL 33126 3.4. CITY-ST-ZIP CITY-ST-ZIF ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition 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 DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

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 chapter 607, or an attachment with an address, with all other like empowered.

CITY-ST-ZIP

URE REQUIRED

CR2F034.(4:1/98)