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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000018874

EXPORT XIMPORT CONSULTING CORP., INC. Mailing Address 4360 North/2Kg Blvd. suite 205 Palm Beach Gardens, FL 33410 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02-23-1998 2a. Mailing Address 4. FEI Number Applied For 65-0818069 42 ND Not Applicable 42 ND WAY Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired 4201 4201 Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be WEST. PALH'BEACH FL. 28 WEST PALH BEACH FZ. Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes the current year Intangible 25 U.S.A. 4.5.A. ⊠No 33407 30 Personal Property Tax. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GILBERTO A. RODRIGUEZ MARTIN E. WASHOFSKY, E.A. P.A. Street Address (P.O. Box Number is Not Acceptable) 82 4360 NORTHLAKE BIND., SUITE 205 4201- 42ND WAY. PALM BEACH GARDENS, FLORIDA 33410 Zip Code 33 407 City WEST PALH BEACH. 84 85 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. GILBERTO A. RODRIGUEZ. 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 □ DELETE 1,1 TITLE TITLE PRESIDENT 1.2 NAME NAME GILBERTU RODRIGUEZ 4201 42 NO WAY 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL. 33407 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition C DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 3.1 TITLE ☐ Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP City-St-ZIP ☐ Change ☐ Addition ☐ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE □ DELETE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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: 616BERTO A. RODALGUEZ.

03-26-99

561-6408289

FILED Apr 08, 1999 8:00 am

Secretary of State

04-08-1999 90035 011 ***150.00

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