

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

FILED
May 13, 1999 8:00 am
Secretary of State

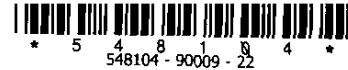
05-13-1999 90009 022 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P98000035962 *JoK*

1. Corporation Name

A Plus Purchasing Agency, Inc.



Principal Place of Business 14733 SW 173rd Terrace Miami, FL 33187	Mailing Address P.O. Box 162118 Miami, FL 33116-2118
--	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/20/98

2. Principal Place of Business

21 **14733 SW 173rd Terrace**

Suite, Apt. #, etc.

22

City & State

23 **Miami, FL USA**

Zip

24 **33187**

Country

25 **USA**

2a. Mailing Address

26 **P.O. Box 162118**

Suite, Apt. #, etc.

27

City & State

28 **Miami, FL**

Zip

29 **33116-2118**

Country

30 **USA**

4. FEI Number

65-0833831

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

**Berrouet, Jean Edouard
14733 SW 173rd Terrace
Miami, FL 33187**

10. Name and Address of New Registered Agent

81 Name

Jean Edouard Berrouet

82 Street Address (P.O. Box Number is Not Acceptable)

83

14733 SW 173rd Terrace

84 City

Miami

FL

85 Zip Code

33187

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

Jean Edouard Berrouet

JEAN EDOUARD BERROUET, PRESIDENT

04/28/99

(Signature, typed or printed name of registered agent and date of appointment)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

☒ P

☐ DELETE

NAME

**Berrouet, Jean Edouard
14733 SW 173rd Terrace
Miami, FL 33187**

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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:

Jean Edouard Berrouet

JEAN EDOUARD BERROUET

04/28/99

(305) 772-5176

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (11/98)