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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000070174

OYUKI INTERNATIONAL EXCHANGE CORP.

Principal Place of Business	Mailing Add
11331 SW 4TH STREET	11331 SW 41
MIAMI EL 33174	MIAMI FL 33

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90011 037 *****8.75 03-17-1999 90011 038 ***150.00



Principal Place	e of Business	Mailing Ad	dress				1 184118	181 110 10101 FULL UDIL	. Bules Buest Du	/[]	9411 9191 1491
11331 SW 4TH	•		11331 SW 4TH STREET MIAMI FL 33174								
MIAMI FL 33174	l .	MIAMI FL 3				1		DO NOT W	RITE IN T	HIS SPACE	
						-	Date Incor	porated or Qualif		10 01 7.02	
						`	08/12/19				
2 Principal Pl	lace of Business	2a. Mailing	Address			- 4	FEI Numbe			Ap	plied For
21		26					65-08	58120		No	t Applicable
Suite, Apt.	#, etc.		rite, Apt. #, etc.						\ <u>\</u>	\$8.75 A	Additional
22		27				_ 5	, Centicate o	of Status Desired	X	Fee Re	quired
City & State	e	City &	City & State				Election Ca	ampaign Financir	ng 🖂	\$5.00	May Be
23		28					Trust Fund	Contribution		Added to	o Fees
Zip	Country	Zip		Country	′	8	, This corpo	ration owes the o	urrent year		
24	25	29	30					roperty Tax.			□No
	9. Name and Address of Currer	nt Registered A	gent	- 04	Nama	10		Address of Nev		ed Agent	
ודמת	Z, NANCY			81	Name	E	VA A	LVAREZ	,		
	SW 26TH STREET			82	Street	Address	P.O. Box Nu	mber is Not Acce	ptable)		
i	II FL 33155			02				7	<u> </u>		
laur./ia	11 1 5 50 100			83	113	<u>331</u>	<u> 52</u>	4 54	wit		
				84	City	Mi	1211		F	EL 85 Zip C	Code 3 /フ/
11 Pursuant	to the provisions of Sections 607.050	02 and 607 1508	, Florida Statutes, t	he abov	e-named	corporati	on submits th	is statement for	he purpose	of changing its	registered
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligi	of Florida, Such	change was autho	rized by Statutes	the corpo	oration's	poard of direc	ctors. I hereby ac	cept the ap	pointment as reg	gistered
1	6-121-		ENA ALV						S-Y-	99	ļ
SIGNATURE	Signature, typed or printed name of registered age								DATE		
12	OFFICERS AF	ND DIRECTORS		13.			ADDITIONS	/CHANGES TO	OFFICERS		
TITLE	PD		DELETE	1 1 TITLE						☐ Change	Addition
NAME	CARMONA, MIGUEL		Ì	12 NAME							•
STREET ADDRESS	11331 SW 4TH STREET			13 STREE	T ADDRESS						
CITY-ST-ZIP	MIAMI FL 33174			14 CITY-5	T-ZiP					- Chorac	Addition
TITLE	VPD			21 TITLE		PO				Change Change	Addition
NAME	CARMONA, ENA L		i	22 NAME		I	A AL	VA REZ 4 STREET			
STREET ADDRESS	11331 SW 4TH STREET		1		T ADDRESS						
CITY-ST-ZIP	MIAMI FL 33174			2 4 CITY-5	St. Zip	MIX	MI F	L 33/75		Change	Addition
TITLE			T (31 TITLE						ondinge	
NAME			i	3 2 NAME	T ADDECC .						
STREET ADDRESS			1		TADDRESS						
CITY-ST-ZIP				34 CHY-5	51-ZIP	 				☐ Change	Addition
TITLE			- H	4 2 NAME						<u></u>	_
NAME			8		TADDDESS	-					1
STREET ADDRESS			9	44 CITY-S	TADDRESS :						
CITY-ST-ZIP				51 TITLE	n- AIF	 -	_			Change	Addition
NAME			2	52 NAME						-	
STREET ADDRESS				53 STREE	T ADDRESS						
CITY-ST-ZIP			-	54 CITY-S	T-ZIP	1					}
TITLE				61 TITLE						Change	Addition
NAME				62 NAME							
STREET ADDRESS,				63 STREE	T ADDRESS						
0.77.07.70				64 CITY-S	T-ZIP						1

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 attachpient with an address, with all other like empowered.

SIGNATURE:

ENA ALVAREZ TED NAME OF SIGNING OFFICER OR DIRECTOR