## 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 # P98000094946

1. Corporation Name

SIGNATURE IMPORTS CO.

## **FILED** Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90006 026 \*\*\*150.00



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Principal Place of Business Mailing Address					ì				
2805 E OAKLAND PARK BLVD. STE 225 FORT LAUDERDALE FL 33306		2805 E OAKLAND PARK BLVD. STE 225 FORT LAUDERDALE FL 33306			DO NOT WRIT	F IN THIS S	SPACE		
	•					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
					············	11/10/1998		<del></del>	
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	_	$\vdash$	Applied For
21		26							Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		•	Additional
22		27							Required
City & State	8	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution		_	d to lees
Zip Country		Zip Country				8. This corporation owes the curr	ent year Inta	ingible ☐Yes	□No
24	25 29 30					Personal Property Tax.  10. Name and Address of New F	Pagistarad A		
	9. Name and Address of Current	Registered Agent	8-	11	Name	10. Name and Address of New P	egistereu z	- Serie	
AMERILAWYER				Ή.	Name				
		82	82 Street Address (P.O. Box Number is N			ible)			
	ALMERIA AVENUE		8:	$\perp$					
COR	AL GABLES FL 33134			3					ĺ
			84	4 (	City		FL	85 Zi	p Code
44 Dureuant	to the provisions of Sections 607.0502	and 607 1508. Florida Statutes	the abo	l ve-n	named corpor	ration submits this statement for the	purpose of o	changing	its registered
office or re	egistered agent, or both, in the State om familiar with, and accept the obligation	f Florida. Such change was aut	norized b	y tne	e corporation	's board of directors. I hereby accep	t the appoin	tment as	registered
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Reg					gnature required v		DATE	D DIBEC	TORE IN 12
12.	OFFICERS AND	DIRECTORS DELETE	13.		1	ADDITIONS/CHANGES TO OF	FICERS ANI	Chang	
TITLE	PSTD	□ DELETE	1.1 TITLE			•			•
NAME	FRANCOIS VERDIER, DENIS		1.2 NAME						
STREET ADDRESS	2805 E OAKLAND PARK BLVD,	SIE 225	1.3 STRE						}
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		1.4 CITY-					☐ Chang	e Addition
TITLE	D	☐ DELETE	2.1 TITLE					Onlang	e 🗀 Addition
NAME	MONTO, MEDELIO E		2.2 NAME	2.2 NAME					Ì
STREET ADDRESS	2805 E OAKLAND PARK BLVD,	STE 225	2.3 STRE	ET AL	DDRESS				ļ
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		2. 4 CITY		ZIP				- Dáddition
TITLE	· ·	☐ DELETE * `	3.1 TITLE			the second of th		Chang	e 🗌 Addition
NAME		- 4	3.2 NAME	Ε					
STREET ADDRESS	•	• •	3.3 STRE	ET AL	DDRESS				
CITY-ST-ZIP			3.4. CfTY-	ST-Z	ZIP				
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NAME			4. 2 NAMI	E					Į
STREET ADDRESS			4.3 STRE	ETAL	DDRESS				
CITY-ST-ZIP			4.4 CITY-	ST-Z	ZiP				
TITLE		☐ DELETE	5.1 TITLE	į				Chang	je 🗌 Addition (
NAME			5.2 NAME						
STREET ADDRESS			5.3 STRE	ETAI	DORESS				ĺ
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP				
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NAME	_		6.2 NAME	Ξ.					Ì
STREET ADDRESS			6.3 STRE	ETAI	DDRESS				l
CINELI ADDREGO			1						ļ

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.

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