

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90002 002 ***150.00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 99000047828

1. Entity Name

ASS EXPORT & IMPORT CORP.

Principal Place of Business

Mailing Address

2. Principal Place of Business

9810 NW 80th AVE

3. Mailing Address

9810 NW 80th AVE.

Suite, Apt., #, etc.

SUITE 8-Q

Suite, Apt., #, etc.

SUITE 8-Q

City & State

HIALEAH GARDENS, FL

City & State

HIALEAH GARDENS, FL

4. FEI Number

65-0921965

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

Zip

Country

33016

USA

Zip

Country

33016

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

RAFAEL WILMAN

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

352 LAKESIDE CT.

City

FL

Zip Code

33326

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida.

SIGNATURE

RAFAEL WILMAN

4/20/00

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00

AFTER MAY 1, 2000 Fee will be \$550.00.

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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	

TITLE	PRESIDENT	☒ Change ☐ Addition
NAME	RAFAEL WILMAN	
STREET ADDRESS	9810 NW 80th AVE SUITE 8-Q	
CITY- ST- ZIP	HIALEAH GARDENS, FL 33016	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. 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 report or supplemental 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RAFAEL WILMAN

4/20/00