## 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 # S09544 1. Corporation Name

IMPORT-SPAIN CORPORATION

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90094 020 \*\*\*150.00



Principal Place	of Business	Mailing Address						1981 BIBAL BIBAL COR
1676 RIDGEWOOD AVENUE 1676 RIDGEWOOD AVENUE HOLLYT HILL, FL 32117-1734 HOLLYT HILL FL 32117-1734						DO NOT WRITE IN T	HIS SPACE	<u>:</u>
						3. Date Incorporated or Qualifed		
Ì						10/30/1990		
2. Principal Place of Business 2a. Mailing Address								Applied For
21		26			59-3034723	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.						•	\$8.	75 Additional
22	27					5. Certifcate of Status Desired	Fe	e Required
City & State	City & State	& State			6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country			8. This corporation owes the current year		
24	25	29 3	0			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Current	t Registered Agent				10. Name and Address of New Register	ed Agent	
				81 Name	•			
PYLE, MICHAEL A.				82 Street Address (P.O. Box Number is Not Accepta			_	
	S. PALMETTO AVENUE							
DAY	ONA BEACH FL 32114			83				Ì
			}	84 City			85	Zip Code
				' · '		-	▝┗▕▕	<u> </u>
	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	nt Florida. Such change was aut	กดกรคด	DV IDA COL	d corpor poration	ration submits this statement for the purposi 's board of directors. I hereby accept the ap	e.of changir pointment	ig its registered as registered
SIGNATURE						when reinstating) DATE		
J	Signature, typed or printed name of registered agent OFFICERS AN		13.	Agent signaturi	required	ADDITIONS/CHANGES TO OFFICERS		CTORS IN 12
12.		DELETE	1.1 TIT	E	T	ADDITIONO/OFFATOES TO OFFTOETH	□ Cha	
1	D COVANICO ANIDDEC	<b></b>	1.2 NA					
NAME	GOYANES, ANDRES			REET ADDRES	,			
STREET ADDRESS	1676 RIDGEWOOD AVENUE			Y-ST-ZIP	1			
CITY-ST-ZIP	HOLLY HILL FL	☐ DELETE	2.1 TIT		<del> </del> -		Chi	ange Addition
TITLE	D COVANIES CARMEN		2.2 NAW				_	-
NAME	GOYANES, CARMEN			VIL REET ADDRES				
STREET ADDRESS	1676 RIDGEWOOD AVENUE			ry-ST-ZIP	1			
CITY-ST-ZIP	HOLLY HILL FL	☐ DELETE	3.1 TIT		+ .		☐ Cha	ange Addition
TITLE	OOVANES ANDRES II		3.2 NA					
NAME expect appends	GOYANES, ANDRES II 1676 RIDGEWOOD AVENUE			VIL REET ADDRES	s			}
STREET ADDRESS			1	Y-ST-ZIP				
CITY-ST-ZIP	HOLLY HILL FL	☐ DELETE	4.1 TIT		+		☐ Ch:	ange Addition
NAME	D COVANES NATALIA	<u> </u>	4.2 N		1			
ľ	GOYANES, NATALIA		1	REET ADDRES	s			
STREET ADDRESS				Y-ST-ZIP	1			
CITY-ST-ZIP TITLE	HOLLY HILL FL	☐ DELETE	5.1 TIT		+		Ch	ange Addition
			5.2 NA				_	_
NAME STREET ADDRESS				REET ADDRES	s			İ
				Y-ST-ZIP	1			ł
CITY-ST-ZIP TITLE		DELETE	6.1 TIT		+		Ch	ange
		<u>.</u>	6.2 NA		1		_	
NAME,				REET ADDRES	s			
STREET ADDRESS				Y-ST-ZIP				
CITY-ST-ZIP	1		0.4 ()		_1			

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:

TYPED OR BYTH THE OF SIGNING OFFICER OR DIRECTOR