

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S25308 (5)

1. Corporation Name

GLOBAL EXPORT CORPORATION

Principal Place of Business

4995 N W 72 AVE  
#405  
MIAMI FL 33166  
US

Mailing Address

4995 NW 72ND AVE  
#405  
MIAMI FL 33166  
US



3. Date Incorporated or Qualified

01/16/1991

3a. Date of Last Report

02/28/1995

4. FEI Number

65-0248748

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 7190 NW 52 Street

26 7190 NW 52 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Miami, Florida

28 Miami, Florida

24 Zip

25 Country

29 Zip

30 Country

33166

USA

33166

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUINTANA, RAYMOND  
5753 SW 35 ST  
MIAMI FL 33155

81 Name

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

9501 SW 93rd Avenue

83

84 City

Miami,

FL

85 Zip Code

33176

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

Signature, type, or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-23-96

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME  
D QUINTANA, RAYMOND  
STREET ADDRESS  
5754 SW 35 ST  
CITY-ST-ZIP  
MIAMI FL

1.2 TITLE ☐ DELETE

NAME  
DT QUINTANA, NANCY M.  
STREET ADDRESS  
5754 SW 35 ST  
CITY-ST-ZIP  
MIAMI FL

1.3 TITLE ☐ DELETE

NAME  
V MARTINEZ, ELIO  
STREET ADDRESS  
1740 S.W. 89TH PLACE  
CITY-ST-ZIP  
MIAMI FL

1.4 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P ☒ Change ☐ Addition

1.2 NAME  
Quintana, Raymond  
1.3 STREET ADDRESS  
9501 SW 93rd Avenue  
1.4 CITY-ST-ZIP  
Miami, FL 33176

2.1 TITLE D/S ☒ Change ☐ Addition

2.2 NAME  
Quintana, Nancy M.  
2.3 STREET ADDRESS  
9501 SW 93rd Avenue  
2.4 CITY-ST-ZIP  
Miami, FL 33176

3.1 TITLE D/V ☒ Change ☐ Addition

3.2 NAME  
Martinez, Elio

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME  
D/T Chinea, Miriam  
4.3 STREET ADDRESS  
1740 SW 89th Place  
4.4 CITY-ST-ZIP  
Miami, Florida 33165

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-96 (305) 477-6344

Date

Daytime Phone #

CR2E034 (12/95)