

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

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AND
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95 MAR -2 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S37383 (4)

1. Corporation Name

B & J IMPORT & EXPORT, INC.

Principal Place of Business

9515 S.W. 148 AVE., CIR. E.
MIAMI FL 33196

Mailing Address

9515 S.W. 148 AVE., CIR. E.
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/13/1991

3a. Date of Last Report

02/02/1994

4. FEI Number

65-0269194

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 10431 N. KENDALL DR.

2a. Mailing Address

25

Suite, Apt. #, etc.

22 D-201

Suite, Apt. #, etc.

27

City & State

23 MIAMI, FL

City & State

29

Zip

24 33176

Country

25 DADE

Zip

29

Country

30

9. Name and Address of Current Registered Agent

CAROLE DE LA TORRE BUENO
9515 S.W. 148 AVENUE CIRCLE EAST
MIAMI FL 33196

10. Name and Address of New Registered Agent

81 Name

CAROLE DE LA TORRE BUENO

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

10431 N. KENDALL DRIVE # D-201

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]
Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT
NAME BUENO, JULIO DE LA TORRE
STREET ADDRESS 9515 S.W. 148 AVE., CIRCLE EAST
CITY-ST-ZIP MIAMI-FL 33196

TITLE DS
NAME BUENO, CAROLE DE LA TORRE
STREET ADDRESS 9515 S.W. 148 AVE. CIRCLE EAST
CITY-ST-ZIP MIAMI-FL 33196

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

12 NAME
13 STREET ADDRESS 10431 N. KENDALL DRIVE # D-201
14 CITY-ST-ZIP MIAMI, FL 33176

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 10431 N. KENDALL DRIVE # D-201
2.4 CITY-ST-ZIP MIAMI, FL 33176

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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 110.07(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(a) Block 12(b) changed, or on an attachment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-95

279-3780