FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

CLICK IMPORT EXPORT CORP.

FILED
Apr 14 1998 8:00am
Secretary of State
Secretary of State

Principal Place of Business Mailing Address					1	1781 JUJI V RQII	dibil albil albil bibil bibil ida l		
2290 N.W. 82ND AVE. Miami Fl. 33122		2290 N.W. 82ND AVE. MIAMI FL 33122			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifie 07/18/1991	d		
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For	
21		26				65-0276291		Not Applicable	
22	Suite, Apt. #, etc.	Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23	City & State	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
24	Zip Country 25	Ζ(p)	30 Co	untry		8. This corporation owes or has Personal Property Tax due Ju		current year Intangible Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
ROSA, RICARDO S. 14475 S.W. 300 TERR. LEISURE CITY, FL 33033			81	K	OSA, RICARDO SS (P.O. Box Number is Not Accep FALLS BL	stable)			
				83 84	City			85 Zip Code	
11	Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the Stal agent. I am lamiliar with, and accept the obli	te of Florida. Such char	ide was authorize	ed by	e-named corpor	ration submits this statement for the n's board of directors. I hereby ac	e purpose cept the a	of changing its registered oppointment as registered	

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 1.1 TITLE ROSA, RICARDO S. NAME 1.2 NAME 1206 FALLS BLVD STREET ADDRESS 1.3 STREET ADDRESS **WESTON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE BUSCARIOLLI, GERALDO J. NAME 22 NAME 2290 N.W. 82ND AVE. STREET ADDRESS 23 STREET ADDRESS MIAMI, FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP ☐ DELETE Change TITLE Addition 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE Change Addition 4.1,TITLE NAME 4. NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE TITLE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 chapter 607, or on an attachment with an address.

SIGNATURE:

04/09/98 (20) 597-9482