## 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** 

1. Corporation	REE EXPORTS, INC.						
Principal Place of Business Mailing Address						. BIBIH BIBIH BIBIH BI	011 01011 1001
8314 NW 14TH ST 8314 NW 14TH ST MIAMI FL 33126 MIAMI FL 33126					DO NOT WRITE IN THE	S SPACE	
US US					3. Date Incorporated or Qualifed		
ı					08/15/1991		
2 Principal F	Place of Business	2a. Mailing Address			4. FEI Number	IqA	lied For
26					65-0281976	Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 A	dditional
22	27				5. Certificate of Status Desired	Fee Re	quired
	ity & State City & State				6. Election Campaign Financing	\$5.00	
23	28		<del></del>		Trust Fund Contribution		
Zip	Country Zip		Country	'	8. This corporation owes the current year Intangible		
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Registered	3 Agent	
CAR	INEDS INEL N CDA		°'				
SANDERS, JOEL D CPA			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
1625 N COMMERCE PARKWAY SUITE 225			-				
WESTON FL 33326			83				
176.	310N 1 L 33020		84	City	<b>F</b> .	85 Zip C	ode
11 Pursuani	to the provisions of Sections 607.05	02 and 607.1508. Florida Statu	tes, the abov	 e-named corp	poration cultimits this statement for the nurnose (	of changing its	registered
l office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	autnorized by orida Statutes	the corporati	on's board of directors. I hereby accept the apprendix of the population on the population of the popu	Ultilitient as reg	JISTELEO .
12.	Signature, typed or printed name of registered ag	ND DIRECTORS	13.	nt signature require	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12
TITLE	144.644 (66-7)		1.1 TITLE			Change	Addition
NAME	<b>I</b>		1.2 NAME				j
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP			1.4 CITY-S	ST-ZIP			
TITLE			2.1 TITLE			Change	Addition
NAME			2.2 NAME		·		1
STREET ADDRESS	'		2.3 STREE	T ADDRESS		ب الروضية	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP			}
TITLE			3.1 TITLE			Change	☐ Addition
NAME .	the contract of the contract o		3.2 NAME		_		ļ
STREET ADDRESS	8	· · · · · · · · · · · · · · · · · · ·	3.3 STREE	TADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-Z:P	- Control of the Cont		
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP				T-ZIP	<u></u>		
TITLE			5.1 TITLE		•	Change	Addition
NAME			5.2 NAME	7.4000500			j
STREET ADDRESS	S			TADDRESS			}
CITY-ST-ZIP	<del> </del>	C notices	5.4 CITY-5	51-ZIP		Change	Addition
I TITLE		☐ DÉLETE				L1 change	
NAME	1		6.2 NAME				

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

NECES REPORTS Macassi

04 | 06 | 99

305-477-1337

FILED Apr 09, 1999 8:00 am Secretary of State

04-09-1999 90042 007 \*\*\*150.00