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 # S82525

CHO IMPORT-EXPORT, INC.

Principal Place of Business

Mailing Address

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90001 025 ***150.00



enncipal elac	e or business	Maining Address							
8871 SW 129	TERR	8871 SW 129 TERR							
MIAMI FL 3317	'6	MIAMI FL 33176			DO NOT	WRITE IN THIS	CDACE		
US US							SPACE		
					3. Date incorporated or Qua	lited		1	
					09/23/1991				
2. Principal P	Place of Business	2a. Mailing Address		1.	4. FEI Number		_ 	plied For	
21 520.	S N.W. 72 4 Ave	. 26 5205 N.	W. 722	Ave.	65-0313352		No	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	7		5. Certificate of Status Desire	ed 🗅	\$8.75	I	~-
22 Mian	ni FL. 33166	27 Miami	FL.		3. Certificate of States Desire	,,	Fee Re	quired	
City & Stat		City & State			6. Election Campaign Finance	ing _	\$5.00	May Be	
23 ,337	64 115 A	28 33/66	4.5	Δ	Trust Fund Contribution		Added t	o Fees	
Zip	Country	Zip	Country		8. This corporation owes the	current year Inta	ngible		
— ·	25	29 3	<u> </u>		Personal Property Tax.	,	☐Yes	□No (
24	9. Name and Address of Curren		1		10, Name and Address of N	ew Registered	Agent		
	3. Name and Addition of Carren	. Hogiotorou Hgom	81 Na	ame		<u> </u>			
RICI	HARD BARON ATTY.]-]]	
11077 BISCAYNE BLVD #307				reet Addre	ess (P.O. Box Number is Not Ac	ceptable)			
	MI FL 33161		<u> </u>						
MIA	MI FL 33101		83						
			84 Cit	he	· · · · · · · · · · · · · · · · · · ·		85 Zip (Onde	
				Ly		FL	CO - P	1	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above-nat	med corpo	ration submits this statement fo	r the purpose of	changing its	registered	
office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was aut	horized by the	corporation	n's board of directors. I hereby a	accept the appoir	itment as re	gistered	
agent. Fa	am familiar with, and accept the obliga	tions of, Section 607.0505, Florid	ia Statutes.	٦.		12 6	4	ĺ	
SIGNATURE		$'$ λ f M 0	egistered Agent signa	1	<u></u>	- 1 + 01			_
	Signature, typed or printed name of registered ager			Briting Ledbingo	ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTO	RS IN 12	(11/98)
12.	,· 	ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO	OT TOERS AN	Change	Addition	Ξ
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CITY-ST-ZIP			5.2 NAME 5.3 STREET ADDI 5.4 CITY-ST-ZIP 6.1 TITLE		• .	·		☐ Addition	

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

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-99 (30

(305) 593 -5004 Daytime Phone #