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 # S82849

SUNDANCE IMPORT & EXPORT INC.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90192 007 ***150.00



Principal Place	of Business	Mailing Address						
121 SE 1ST ST.		1400 LINCOLN RD						
703		SUITE 203			DO NOT WRITE IN THIS SPACE			
MIAMI FL 33131		_	MIAMI BEACH FL 33139		3. Date Incorporated or Qualifed			
US		US			· ·	,	. :	}
	<u>-</u>	20 Nautin Address			09/26/1991 4. FEI Number		. Δ	oplied For
2. Principal Pl	ace of Business	2a. Mailing Address					 	ot Applicable
21		26			65-0289491			Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired			equired	
22		27 City & State						
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
23		Zip Country		This corporation owes the curr	ont voor In		101,000	
Zip	Country	Zip	COBIN	,	Personal Property Tax.	en year m	Yes	□No
24	25	29 30			10. Name and Address of New F	Registered		
	9. Name and Address of Current	Registered Agent	8	1 Name	To Italia and Address of them.		-3	· ·
RIBEIRO, ANGELA								
	LINCOLN RD STE 203	82 Street A		2 Street Add	ress (P.O. Box Number is Not Accepta	able)		
			8				 :	
FIE	— ·		l°	3				į
MIAN	AI BEACH FL 33139		8	4 City			85 Zip	Code
	·					FL	<u>- </u>	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes, t Florida, Such change was autho	he abo rized b	ve-named com	poration submits this statement for the ion's board of directors. I hereby accep	purpose of pt the appo	r changing it intment as r	egistered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statute	es.	,	• •		
SIGNATURE	,							
	Signature, typed or printed name of registered agent :			ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OF	DATE EICEDS AI	ND DIRECT	ORS IN 12
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OF	FICERS A	Change	Addition
TITLE .	D	☐ DELETE	1.1 TITLE				C) Ollarigo	[,_] / (Galas)
NAME	RIBEIRO, ANGELA MENDONC	1	1.2 NAMI	·				ì
STREET ADDRESS	1400 LINCOLN RD STE 203		1.3 STRE	EET ADDRESS				
CITY-\$T-ZIP	MIAMI BEACH FL		1.4 CITY				Change	Addition
TITLE	, D .	☐ DELETE	2.1 TITLE			•	Containge	[_] Addison
NAME	CAMPOS, DALMA	1	2.2 NAM	E				\ -
STREET ADDRESS	1400 LINCOLN RD 203		2.3 STRE	EET ADDRESS				1
CITY-ST-ZIP	Will am De torri te		2. 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE	 			Change	Addition
NAME			3.2 NAM	E	•			1
STREET ADDRESS			3.3 STRE	EET ADORESS				Ì
CITY-ST-ZIP			3.4. CFTY	(-ST-ZIP				
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	E				ļ
STREET ADDRESS			4.3 STRE	EET ADDRESS				1
	· '		4.4 CITY	ST.7IP				
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	-			Change	☐ Addition
NAME	•		5.2 NAM					
				EET ADDRESS				
STREET ADDRESS			5.4 CITY	• 1				Ì
CITY-ST-ZIP	<u> </u>	DELETE	6.1 TITLS				Change	Addition
TITLE			6.2 NAM				٠	_
NAME				EET ADDRESS				
STREET ADDRESS								
	• • • • • • • • • • • • • • • • • • •		A 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: