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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DE PARTMENT OF STATE

Katherine Harris

Sec etary of State DIVISION OF CORPORATIONS

DOCUMENT # \$93460

1. Corporation Name

P.B. EXPORT LTD. INC.

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90009 042 ***150.00



							ICANI ANALI ICAN Nama di Baran
Principal Place of Business Mailing Address							
		2871 TIMBERCREEK CR. BOCA RATON FL 33431		DO NOT WRITE IN	THIS SPACE		
					Date Incorporated or Qualified 11/12/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		plied For
21		26		65-0308337		t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Cert fcate of Status Desired	\$8.75 / Fee Re		
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Added		
Zip Country		Zip Country		8. This corporation owes the current year		-	
24	25	29 30	0		Personal Property Tax.	Yes	Mo
	9. Name and Address of Current				10. Name and Address of New Registe	red Agent	
			81	Name			1
Copperthwaite, David J. 2871 Timercreek Cr.			82	Street .4	Address (P.O. Box Number is Not Acceptable)		
BOCA	A RATON FL 33431		83				Ì
			84	City		85 Zip	Code
office or re agent. I an	o the provisions of Sections 607.050% ogistered agent, or foth, in the State on familiar with, and accept the obligat	2 and 607.1508, Florida Statutes of Florida. Such change was autitions of, Section 607.0505, Florid	, the abov horized by la Statutes	e-named : the corpo	corporation subraits this statement for the purpor ration's board of directors. I hereby accept the a		registered gistered
SIGNATURE Signature, typed or printed name of registered agrint and title if applicable. (NotTE: Registered agrint and title if applicable.				nt signature n	quired when reinstating) DA		NDC 181 42
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTO Change	Addition
TITLE	DTS	☐ DELETE	1.1 TITLE	Ì		∐ Crange	
NAME	COPPERMINANC, DAVID		1.2 NAME	-			ļ
STREET ADDITESS	2871 TIMBERCREEK CIRCLE			TADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-5	T-ZIP		[7] Change	Addition
TITLE	PD	☐ DELETE	2.1 TITLE	-			
NAME	HAYWARD, RICHARD		2.2 NAME	[
STREET ADDICESS	2871 TIMBERCREEK CIRCLE			TADDRESS			ĵ
CITY-ST-ZIP	BOCA RATON FL	☐ DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP	<u> </u>	☐ Change	Addition
TITLE	VO	[] Nerele	3.1 TITLE				
NAME	FORBES, EMMY			T ADDRESS			
STREET ADDFESS	2871 TIMBERCREEK CIRCLE		3.4, CITY-			_	
CITY-ST-ZIP	BOCA RATON FL	□ DELETE	4.1 TITLE	31-21		☐ Change	Addition
TITLE			4 2 NAME				
NAME				T ADDRESS			
STREET ADDF ESS			4.4 CITY-				
CITY-ST-ZIP TITLE	<u></u>	☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STRE	TADDRESS			į
CITY-ST-ZIP			5.4 CITY-				- Addition
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				į
STREET ADDRESS			6.3 STRE	ET ADDRESS			
CITY-ST-ZIP	}		6.4 CITY-	ST-ZIP			information

14. I here by 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 indical ed 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 change 1, or on an attacament with an address, with all other like empowered

SIGNATURE: