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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # V09968

SIGNATURE:

(1)

AMERICAN RESINS EXCHANGE CORP.

FILED Feb 27 1997 8:00am Secretary of State

2/21/97 (305)577-4500

Principal Plane of Businesis 601 BRICKELL KEY DRIVE SUITE 501 MIAMI FL 33131		Mailing Address 601 BRICKELL KEY DRIVE SUITE 501 MIAMI FL 33131-2650						
US		US			3. Date Incorporated or Qualified 01/24/1992	I .	ate of Last R	Report
2. Principal f	iace of Business	2a. Mailing Address			4. FEI Number	- 04	/22/1996 Ar	pplied For
21		26			AF 6556509		h	ot Applicable
Suite, Apri	#, Ol::	Surte, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
Oity & State	(*	City & State			6. Election Campaign Financing		-	May Be
[23] Zipi	Country	28 Ζιρ	Country	/	Trust Fund Contribution	ا المادة معاملات		to Fees
24 25		29	Ի ₁ ՝ Ի		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent		·	10. Name and Address of New F	legistered	Agent	
	TERREZ, RENALDY J.	•	81	Name				
	BRICKELL KEY DR		82	Street Add	dress (P.O. Box Number is Not Accept	able)		
STE	MI FL 33131		83					
MICA	MITE GOTO			<u> </u>			···-	
		,	84	City		FL	85 Zip	Code
j onice or r	egisterior agent, or both litine State in familiar with, and accept the oblig	of Florida, Such change was pations of, Section 607.0505, Florida and the change cable (NO	authorized by lorida Statute	y the corpora s.	rporation submits this statement for the ation's board of directors. I hereby accurred when reinstating)	ept the ap	pointment as	registered
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFF	ICERS AN		
TOLE NAME	s Gutierrez, renaldy J.	L DELETE	1.1 TOTLE				L Change	Addition
STREET ADDRESS	601 BRICKELL KEY DRIVE, ST	TF 501	1.2 NAME 1.3 STREET	r Abonceé				
Cliv-\$1-76	MIAMI FL		1.4 CITY-5					
ht:F	DP DELETE		2.1 TITLE			·	Change	Addition
NAME	MAYORGA, OSCAR D.		2.2 NAME					
STREET ADDRESS	7531 SW 1091H AVE		2.3 \$TREET	ADDRESS				
DOMEST 700	MIAMI FL DVP	DELETE	2 4 CITY -: 3 1 TITLE	S1-ZIP			1 1 04	1 database
NAME	MAYORGA, LYDIA C.	<u></u>					Change	Addition
STREET ANDRESS	7504 OW 400TH AVE		3 3 STREET	ADDRESS				
CITY+S1+76*	MIAMI FL		3.4. CHY-	ST-ZIP				
THE		DELETE	4 1 TITLE				Change	Addition
NAMI			4 2 NAME	i	-			
STREET ACORESS			4 3 STREET					
DOMEST ZIF		DELETE	4.4 CHY-S 5.1 THLE	51 - ZIP			Change	Addition
NAME			5.2 NAME				- Chango	AUGINOH
STREET ADDRESS			5 3 STREET	ADDRESS				
City-St-2ii			5.4 CITY - 5	ST - ZIP				
1011		DELETE	61 TITLE	[Change	Addition
SAME			62 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				

14. I do be reby 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 and cated on the armoni report or supplemental annual report in true and accurate and that my signature shall have the same legal effect as if made under oath, that have an according to the comporation or the receiver or quistee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if hanged, or or an attachment with an address.