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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

COMEX INTERNATIONAL CORPORATION

Place of Business	Mailing Address	
68TH STREET . 33166	8388 NW 68TH STREET Miami Fl 33166	

FILED Apr 10 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
8388 NW 687H STREET 8388 NW 687H STREET MIAMI FL 33166 MIAMI FL 33166							
					DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporate	ad or Qualified		-
8 D (==(==1.D		1.62		02/10/1992		·	
1 '	Place of Business	2a. Mailing Address		4. FEI Number	•		slied For
21		26		65-031116	9		Applicable
Suite, Apt.	₩, BIC.	Suite, Apt. #, etc.		5. Certificate of Sta	atus Desired	\$8.75 Ad Fee Req	
22		City & State				·	<u> </u>
City & State		⊢		6. Election Campai	~ -	\$5.00 M Added to	
Zip	Country	28	Country	Trust Fund Cont			
24	25		30		owes or has paid the cuty Tax due June 30.		No I
47	9. Name and Address of Curre		1301		ress of New Registered		
			81 Nam				
	RIDES, LUIS						
	33 N.W. 68TH ST.		82 Stree	Address (P.O. Box Number	is Not Acceptable)		
MIA	AMI FL 33166		83	TOB NOW	612,		
			84 City	MIAMI	FL		166
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the oblig	32 and 607.1508, Florida Statute	es, the above-name	ed corporation submits this sta	itement for the purpose of	of changing its	registered
agent. I a	im familiar with, and accept the oblig	jations of, Section 607.0505, Flo	orida Statutes.	orporation's poard or directors	. Frieldby accept the app	John Miller III as re	gistered
SIGNATURE	Signature, lypod or printed name of registered agr	out and title if applicable. (NOTE	Registered Agent signate	ure required when reinstating)	04/06,	198	
12.		ID DIRECTORS	13.		NGES TO OFFICERS ANI	D DIRECTORS	IN 12
TITLE	D	☐ DELETE	1.1 TITLE			Change	Addition
NAME	Perides, Luis		1.2 NAME				
STREET ADDRESS	8233 N.W. 68TH ST.		1.3 STREET ADDRESS	8385 NO	N 6840 57	REET	
CITY-ST-ZIP	MIAMI BEACH FL 33166		1.4 CITY - ST - ZIP	MIAMI	PL 3	3166	
TITLE		☐ DELETE	2.1 TITLE			Change	Addition
NAME			2.2 NAME				
STREET ADDRESS			2 3 STREET ADDRESS	3			
CITY-ST-ZIP			2: 4 CiTY - ST - ZIP				ì
TITLE	— n.u.	DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				Ì
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME			-	
STREET ADDRESS			4.3 STREET ADDRESS	;			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				}
TITLE		DELETE	5.1 TITLE	 		Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS	.			
				, [
CATY-ST-ZIP	_	C or isc	5.4 CITY - ST - ZIP			Channe	Addition .

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Plorida 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

NAME STREET ADDRESS

CITY-ST-ZIP