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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Jan 24 1997 8:00am

Secretary of State

(305)551-7214

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V24298

(4)

EFEM. CORPORATION Principal Place of Business Mailing Address 12530 SW 8TH STREET 12530 SW 8TH STREET MIAMI FL 33184-1412 MIAM! FL 33184 3. Date Incorporated or Qualified 3a. Date of Last Report 03/27/1992 01/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0360100 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Zip Country Zφ Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FORTOUL, EDUARDO 9056 S.W. 112TH PLACE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33176 83 R4 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed harno of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 98 6 6 12. OFFICERS AND DIRECTORS 13. PD DELETE Change Addition 1.1 TITLE TITLE FORTOUL, EDUARDO NAME 1.2 NAME CR2E034 9056 S.W. 112TH PL STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-S1-ZIP STD DELETE Change Addition TITLE 2.1 TITLE MENDEZ, EDUARDO 2.2 NAME NAME 13710 S.W. 104TH TERR. 2.3 STREET ADDRESS STREET ADDRESS MIAM! FL 2. 4 CITY-ST-ZIP CHTY - ST - ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-ZIF

14. I do 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 arms at 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 comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name