FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 APR 19 PM 4:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V43167** **(8)**

1. Corporation Name
B.N.L. IMPORT & EXPORT CORP.

Principal Place of Business	Mailing Address
28 N.W. 11TH AVE. MIAMI FL 33130	28 N.W. 11TH AVE. MIAMI FL 33130

Note change

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/12/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business	2a. Mailing Address
21 1119 West Flagler St	26 1119 W. Flagler St
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Miami Fl	28 City & State: Miami Fl. 33130
24 Zip: 33130 / 25 Country	29 Zip / 30 Country

4. FEI Number: 65-0345030 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RODRIGUEZ, BERNARDINO 1143 W. FLAGLER ST. MIAMI FL 33130	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	1.1 TITLE	DT	☒ Change ☐ Addition
NAME	RODRIGUEZ, BERNARDINO	1.2 NAME	CARMONA Efrain Marcos	
STREET ADDRESS	1143 W. FLAGLER ST.	1.3 STREET ADDRESS	9343 Byron Ave	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Surfside F. (no more)	
TITLE	DT	2.1 TITLE	STD	☐ Change ☒ Addition
NAME	CARMONA, EFRAIN MARCOS	2.2 NAME	Marika Rodriguez	
STREET ADDRESS	9343 BYRON AVE.	2.3 STREET ADDRESS	1119 West Flagler St.	
CITY-ST-ZIP	SURFSIDE FL (no more)	2.4 CITY-ST-ZIP	Miami Fl. 33130.	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, added or deleted, or on an attachment with an address.

SIGNATURE: Bernardino Rodriguez 04/06/95 (305)541-3296
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E085 (1/95)