

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

FILED
Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moriam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V53761 (5)
1. Corporation Name
DEMARK CUSTOMS BROKER, INC.

Principal Place of Business
2801 NW 74TH AVE
STE 211
MIAMI FL 33122
US

Mailing Address
PO BOX 52-1456
MAIMI FL 33152-1456
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1950 N.W. 70th Ave Suite, Apt. #, etc. 22 City & State 23 miami, Florida Zip 24 33124 Country 25 Dade		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 07/24/1992	
				4. FEI Number 65-0350492	
				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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent RAMIREZ, MIRNA 2801 NW 74TH AVE STE 211 MIAMI FL 33122		10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) 1950 N.W. 70th Avenue B3 B4 City miami B5 Zip Code FL 33124	
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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 MIRNA Ramirez, President cu Ramir 03-27-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST RAMIREZ, MIRNA 2801 NW 74TH AVE STE 211 MIAMI FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☒ Change ☐ Addition 1950 N.W. 70th Avenue miami FL. 33124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAMIREZ, MIRNA 2801 NW 74TH AVE STE 211 MIAMI FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☒ Change ☐ Addition 1950 N.W. 70th Avenue miami, FL. 33124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RAMIREZ, RAMIRO M. 2801 NW 74TH AVE STE 211 MIAMI FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☒ Change ☐ Addition 1950 N.W. 70th Avenue miami, FL. 33124
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I 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 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, or on an attachment with an address.

SIGNATURE: cu Ramir - MIRNA Ramirez 03-27-98 305 477-0046

CR2E034 (10/97)