

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995

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



DOCUMENT # V58110 (0)
 1. Corporation Name
MEI INTERNATIONAL TRADE, INC.

Principal Place of Business Mailing Address
4408 N.W. 74TH AVENUE MIAMI FL 33166 US
8360 W. FLAGLER 205 MIAMI FL 33144 US

2. Principal Place of Business 2a. Mailing Address
21 8360 W. Flagler 26 4408 NW 74 Avenue
 Suite, Apt. #, etc. Suite, Apt. #, etc.
22 #205 27 -----
 City & State City & State
23 Miami, Florida 28 Miami, Florida
 Zip Country Zip Country
24 33144 25 U.S.A. 29 33166 30 U.S.A.

APPROVED AND FILED
95 APR 24 AM 9:07
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/12/1992** 3a. Date of Last Report **04/25/1994**
 4. FEI Number **65-0346359** 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 S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
THORREH-BAYOUTH, LILLIANA
780 N.W. LE JEUNE ROAD
#413
MIAMI FL 33128

10. Name and Address of New Registered Agent
 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 *Lilliana Thorreh-Bayouth* **LILLIANA THORREH-BAYOUTH** DATE **4/10/95**

12. OFFICERS AND DIRECTORS

TITLE	PDT
NAME	BAINOTTI, EMILIO
STREET ADDRESS	SARMENTO 165 4-A
CITY - ST - ZIP	BAHIA BLANCA, ARGEN.
TITLE	DV
NAME	CRUCIANELLI, MARTA
STREET ADDRESS	SARMENTO 165 4-A
CITY - ST - ZIP	BAHIA BLANCA, ARGEN.
TITLE	DS
NAME	BAINOTTI, JOSE A.
STREET ADDRESS	SARMENTO 165 4-A
CITY - ST - ZIP	BAHIA BLANCA, ARGEN.
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1 2 NAME	
1 3 STREET ADDRESS	
1 4 CITY - ST - ZIP	
2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2 2 NAME	
2 3 STREET ADDRESS	
2 4 CITY - ST - ZIP	
3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3 2 NAME	
3 3 STREET ADDRESS	
3 4 CITY - ST - ZIP	
4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4 2 NAME	
4 3 STREET ADDRESS	
4 4 CITY - ST - ZIP	
5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5 2 NAME	
5 3 STREET ADDRESS	
5 4 CITY - ST - ZIP	
6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6 2 NAME	
6 3 STREET ADDRESS	
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)(k), 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 and changed, upon attachment with an address.
 SIGNATURE: *[Signature]* **Secretary/Director** **4/5/95** **(305)477-4764**