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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # V63209				
•	FASTENER EXPORT, INC.	,			
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Principal Place	of Business	Mailing Address			T ENDIN ORIGIN ORIGIN AND HAVE HELD BOLLD ROLL DIGHT OF HELD BEAR OLD IT BEAR OF AND
21444 SW 88 PI	LACE	21444 SW 88 PLACE			
MIAMI FL 33189	1	MIAMI FL 33189			DO NOT WRITE IN THIS SPACE
US		US			3. Date Incorporated or Qualifed
					09/09/1992
.2. Principal Pl	ace of Business-	2a. Mailing Address	• .	- و ت	
21		26			65-0403605 Not Applicab
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required
22		27			- Control - Cont
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees
Zip			Country	/	8. This corporation owes the current year Intangible
24	25 29 30		<u> </u>		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		I N	10. Name and Address of New Registered Agent
RI AN	ICO, MONICA		81	Name	
	SW 109 PATH		82	Street A	Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33173-2766			83		
*****	, , , , , , , , , , , , , , , , , ,				
			84	City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the abov	e-named c	corporation submits this statement for the purpose of changing its registered
office or re agent. I ar	egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was auth ons of, Section 607.0505, Florida	orized by Statutes	tne corpor 3.	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered AND DIRECTORS			nt signature rec	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICERS AND	DELETE	13.		Change Addi
NAME	BLANCO, MONICA	_		1	
STREET ADDRESS			1.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189		1.4 CITY-S	ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addi
NAME	BLANCO, JESUS 🌿 _		22 NAME	.	with a second of the second of
STREET ADDRESS	2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189		2. 4 CITY-	ST-ZIP	☐ Change ☐ Addi
TITLE	SECD	☐ DELETE 3.1 TI			☐ Change ☐ Addi
NAME			3.2 NAME	T 10000000	
STREET ADDRESS			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZIP			4.1 TITLE	31-ZIP	Change Addi
NAME	ALESSADRA NOVOA	<u> </u>	4. 2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP	MIAMI FL 33189		4.4 CITY-S	į.	
TITLE			5.1 TITLE		· Change Addi
NAME			5.2 NAME	ł	
STREET ADDRESS			5.3 STREE	T ADDRESS	
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addi

CITY-ST-ZIP 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

RINTED NAME OF SIGNING OFFICER OR DIRECTOR