

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **V68716** (2)

1. Corporation Name

IMP-EX INTERNATIONAL TRADING COMPANY, INC.



Principal Place of Business

Mailing Address

**17971 BISCAYNE BLVD.
104
NORTH MIAMI BEACH FL 33160**

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104
NORTH MIAMI BEACH FL 33160**

3. Date Incorporated or Qualified 10/06/1992	3a. Date of Last Report 08/09/1995
4. FEI Number 65-0362834	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	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**MARINO, GERARD A. P.A.
4330 SHERIDAN STREET
SUITE 202B
HOLLYWOOD FL 33021**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1518, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed in plain text of registered agent and the agent's address. (Date) _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92	
TITLE	PS	1.1 TITLE	☐ Change ☐ Addition
NAME	OMRAMI, ELYAHOO	12. NAME	
STREET ADDRESS	732 N.E. 206 ST.	13. STREET ADDRESS	
CITY-STATE-ZIP	N. MIAMI BEACH FL 33179	14. CITY-STATE-ZIP	
TITLE	VPT	2.1 TITLE	☐ Change ☐ Addition
NAME	ALLEMAN, ANDRE'	22. NAME	
STREET ADDRESS	1026 NE 202 LANE	23. STREET ADDRESS	
CITY-STATE-ZIP	N. MIAMI BEACH FL 33179	24. CITY-STATE-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY-STATE-ZIP		34. CITY-STATE-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY-STATE-ZIP		44. CITY-STATE-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY-STATE-ZIP		54. CITY-STATE-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY-STATE-ZIP		64. CITY-STATE-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 of changes, or on an attachment with an address.

SIGNATURE:

ELYAHOO OMRAMI 04-23-96
(PRESIDENT)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dir.

Director State #

CR2E034 (12/95)