


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

FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V72407** (2)
1. Corporation Name
ENRIQUILLO EXPORT & IMPORT INC.



Principal Place of Business 55 WESTON RD SUITE 314 FT LAUDERDALE FL 33326 US	Mailing Address 55 WESTON RD SUITE 314 FT LAUDERDALE FL 33326 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 15710 WOODGATE PLACE Suite, Apt. #, etc. 22 City & State 23 SUNRISE, FL Zip Country 24 33326 25 BROWARD		2a. Mailing Address 26 15710 WOODGATE PLACE Suite, Apt. #, etc. 27 City & State 28 SUNRISE, FL Zip Country 29 33326 30 BROWARD		3. Date Incorporated or Qualified 10/20/1992	
		4. FEI Number 65-0365073		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VARGAS, RAFAEL O.
609 WOODGATE CIRCLE
SUNRISE FL 33326**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1030 S.W. 135 WAY
83
84 City DAVIE
85 Zip Code FL 33325

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

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VARGAS, RAFAEL O.	1.2 NAME	
STREET ADDRESS	15710 WOODGATE PLACE	1.3 STREET ADDRESS	1030 S.W. 135 WAY
CITY-ST-ZIP	SUNRISE FL	1.4 CITY-ST-ZIP	DAVIE, FL 33325
TITLE	D <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALVAREZ, MANUEL R.	2.2 NAME	
STREET ADDRESS	15710 WOODGATE PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	SUNRISE FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE:

Rafael Vargas Feb/02/98

CR2E034 (10/97)