

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 17 PM 3:17

DOCUMENT # 618653 (O)
1. Corporation Name
UNITED STATES CARIBBEAN TRADING CO., INC.

Principal Place of Business Mailing Address
6411 N.W. 35TH AVENUE 6411 N.W. 35TH AVENUE
MIAMI FL 33147 MIAMI FL 33147

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 04/25/1979 3a. Date of Last Report 03/17/1994
4. FEI Number 59-1931870 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 State, Apt. #, etc. 26 State, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

9. Name and Address of Current Registered Agent

MILLER, BROOKS C.
299 ALHAMBRA CIRCLE, SUITE 405
CORAL GABLES FL 33143

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 607.0905, Florida Statutes.

SIGNATURE

(Signature for principal officer or registered agent and then if applicable)

(If Applicable: Registered Agent signature required when necessary)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE P
2. NAME HOFLAND, HERMAN W.
3. STREET ADDRESS HENDRIKLAAN 6
4. CITY-ST-ZIP CURACAO, NETH., ANT.
1. TITLE V
2. NAME WIENK, J.
3. STREET ADDRESS MALMOKWEG 21
4. CITY-ST-ZIP ARUBA, NETH., ANT.
1. TITLE T
2. NAME KNETSCH, A.
3. STREET ADDRESS FERGUSONSTRAAT 78
4. CITY-ST-ZIP ARUBA, NETH., ANT.
1. TITLE S
2. NAME VISSCHER, J. JONGH
3. STREET ADDRESS WARAWARAWEG 10
4. CITY-ST-ZIP CURACAO, NETH., ANT.
1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP
1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME No Vice-president anymore
2.3 STREET ADDRESS Mr. J. Wienk resigned
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME T
3.3 STREET ADDRESS Schoen G.
3.4 CITY-ST-ZIP Mauritslaan 3
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS Curacao Netherlands Antilles
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ 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 190.07(3)(b), 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 my address.

SIGNATURE:

J. Jongh Vischer

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

31/1/95

(Date)

(Signature/Name)