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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M33504

AVJET TRADING INC.

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Principal Place of Business Mailing Address								1			
5235 N.W. 74TH TERRACE 5235 NW 74TH TERR											
LAUDERHILL FL 33319 US				LAUDERHILL FL 33319 US				DO NOT WRITE IN THIS SPACE			
								3. Date Incorporated or Qualified			$\neg$
								06/09/1986	•		
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		Applied For	$\dashv$
21				26				59-2683127		Not Applicab	le
Suite, Apt. #, etc.				Suite, Apt. #, etc.					\$8.7	5 Additional	$\exists$
22			27	27				5. Certificate of Status Desired Fee Required			
City & Sta	ate		City & State	3. State			6. Election Campaign Financing \$5.00 May Be			$\neg$	
23				28				Trust Fund Contribution Added to Fees			
Zip Country			<u> </u>	Zip Country				8. This corporation owes the current year Intangible			
24		25	29		30			Personal Property Tax.	☐ Yes	□No	
	9. Name	and Address of Curre	nt Registe	ered Agent				10. Name and Address of New Regist	ered Agent		_
KYN	NE, JAMES	P				81	Name				
760		82 Street Addre			dress (P.O. Box Number is Not Acceptable)						
7600 SW 57TH AVE., SUITE 201 SOUTH MIAMI FL 33143								The second secon		gregories Gregorias Constitutions and and	
	O 111 1910 1911	1 0 00110				83		一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一			1
	•					84	City	# 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Z	ip Code	_
	- 15 · · · · ·								PL		
office or agent. I	registered ag am familiar w	gent, or Sections 607.050 gent, or both, in the State ith, and accept the obliga	of Florida ations of, S	7.1508, Florida Statu n. Such change was a Section 607.0505, Flo	tes, the a authorized orida Stat	bove by t utes.	the corporation	poration submits this statement for the purpoon's board of directors. I hereby accept the a	se of changing ippointment as	its registered registered	
SIGNATURE	:										
OIOIW TOTAL		or printed name of registered age	ont and title if a	applicable. (NOTI	: Registered	Agent	t signature require	od when reinstating)	E		
12.		OFFICERS AN	ND DIREC		13.			ADDITIONS/CHANGES TO OFFICER	S AND DIREC	TORS IN 12	
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NAME	1.	CAETANO			1.2 N	ME					
STREET ADDRESS	1	74TH TERRACE			1.3 ST	REET	ADDRESS				
CITY-\$T-ZIP	LAUDERI	HILL FL			1.4 C	TY-\$T	-ZIP	•			
TITLE	D			☐ DELETE	2.1 TI	ΓLE			☐ Chang	ge 🔲 Additi	on
NAME	1	CAETANO			2.2 N/	ME					
STREET ADORESS		74TH TERRACE			2.3 \$7	REET	ADDRESS				
CITY-ST-ZIP	LAUDER	ILL FL			2.4 C	TY-ST	T-ZIP				
TITLE	VD.			☐ DELETE	3.1 TI	ΠE			☐ Chang	je 🗌 Additi	on
NAME		KATIA A.			3.2 N	ME			4.		
STREET ADDRESS		74TH TERRACE			3.3 \$1	REET	ADDRESS	(A)		3. 890 884 80	ji l
CITY-ST-ZIP	LAUDERH	HLL FL			3.4. C	TY-ST	r-ZIP				3
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NAME					6.2 NA	ME		\$	_ •		ļ
STREET ADDRESS	1				6.3 ST	REET	ADDRESS				

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 supplies that I am an officer or director of the consoration 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 charged, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 

Feb 17, 1999 8:00am

**Secretary of State** 

02-17-1999 90065 033 \*\*\*150.00