Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90145 038 ***150.00

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 # P95000033178

1. Corporation Name

INTERNATIONAL TRADE SERVICES U.S.A., INC.

								90))) 10)) 10)1 			
Principal Place of Business Mailing Address							f (001)001 [40 10101 01111 00111				
8331 NW 68TH ST. 8331 NW 68TH ST.											
MIAMI FL 33166 MIAMI FL 33166							DO NOT WRITE IN THIS SPACE				
US		U\$					3. Date Incorporated or Qualife		017102		
							04/27/1995	-			
Principal Place of Business 2a. Mailing Address				•			4. FEI Number			Applied For	
21 26							65-0576316			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						-			\$8.7	5 Additional	
22		27					5. Certifcate of Status Desired		Fee	Required	
City & Stat	e	City & State		-			6. Election Campaign Financing	, ,	\$5.0	00 May Be	
23		28					Trust Fund Contribution		Adde	ed to Fees	
Zip	Country	Zip	F				8. This corporation owes the current year Intangible				
24 25 29			30				Personal Property Tax.				
	9. Name and Address of Curre	ent Registered Agent		04	Mana		10. Name and Address of New	Registered	Agent		
DI III	7 ALDEDTO I			81	Name	3	•				
RUIZ, ALBERTO J. 5141 NW 114TH CT.				82 Street Address (P.O. Box Number is Not Acceptable)							
						·	····				
#10	MI FL 33178			83						Ì	
MIA	MI FL 331/6			84	City	*		1 - L	85 Z	ip Code	
								FL_	•		
11. Pursuant	to the provisions of Sections 607.08 egistered agent, or both, in the Stat	502 and 607.1508, Florida Stat te of Florida, Such change was	tutes, the al	ove bv	-named	d corpora poration:	ation submits this statement for th s board of directors. I hereby acc	e purpose of ept the appoi	changing ntment as	its registered registered	
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Stati	ites.		,	•			_	
SIGNATURE											
	Signature, typed or printed name of registered a		TE: Registered	Ageni	signature	required wh	hen reinstating) ADDITIONS/CHANGES TO O	DATE	ID DIREC	TORS IN 12	
12.		AND DIRECTORS	1,1 111				ADDITIONS/CHANGES TO C	T TOERO A	Chang		
TITLE	PD Ruiz, Alberto J		1.2 NA								
NAME					ADDDCCC						
STREET ADDRESS	!			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		3					
CITY-ST-ZIP	MIAMI FL 33178VD				- ZIP	+			[] Chang	ge Addition	
TITLE	·		2.1 111								
NAME	Trong Trong Trong		2.2 NA		*DDDCCC				÷		
STREET ADDRESS	l				ADDRESS	3				Ì	
CITY-ST-ZIP	MIAMI FL 33176	☐ DELETE	2. 4 Cl		1-21	-			[] Chan	ge Addition	
TITLE			3.1 H								
NAME					ADDRESS					}	
STREET ADDRESS						1					
CITY-ST-ZIP		☐ DELETE	3.4. CI 4.1 TT		1-212	+			☐ Chan	ge Addition	
TITLE			4.1 N						_	"	
NAME					************						
STREET ADDRESS	, ,				ADDRESS	3					
CITY-ST-ZIP		☐ DELETE	4.4 CF 5.1 TT		· ZIP	+			☐ Chan	ge	
TITLE		C. OLLETE	5.1 H								
NAME	la de desta				ADORESS	s					
STREET ADDRESS	# 122 1 1 1 1 1 1 1 1		5.4 Cf			-					
CITY-ST-ZIP***	Francis	DELETE	6.1 Ti		-0	+				ge Addition	
TITLE				LC					☐ Chan	QC AGUIIION I	
NAME 2.	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		6.2 N						Chan	ge Madillon	

14. I hereby certify that the information supplied with this filling 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-7IP