

**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

AMENDED REPORT  
 FILED

NOV 11 10:08

STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT #**

P98000103057

1. Corporation Name

ITALBRANDS TRADING, INC.

Principal Place of Business

2750 N.W. 84th Avenue  
 Miami, Florida 33122

Mailing Address

2 S. Biscayne Blvd.  
 Suite 3400  
 Miami, Florida 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

1 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

2 City & State

27 City & State

3 Zip Country

28 Zip Country

4 25 29 30

3. Date Incorporated or Qualified

12/10/1998

4. FEI Number

65-0886818

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing

\$5.00 May Be

Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

Valdes-Fauli Corporate Services, Inc.  
 2 S. Biscayne Boulevard  
 Suite 3400  
 Miami, Florida 33131

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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D/P  DELETE

NAME Durante, Maurizio  
 STREET ADDRESS 2750 N.W. 84th Avenue  
 CITY-ST-ZIP Miami, Florida 33122

TITLE T  DELETE

NAME Sosa, Yanira Rodriguez  
 STREET ADDRESS 2750 N.W. 84th Avenue  
 CITY-ST-ZIP Miami, Florida 33122

TITLE S  DELETE

NAME Valdes-Fauli, Raul J.  
 STREET ADDRESS 2 S. Biscayne Blvd., Suite 3400  
 CITY-ST-ZIP Miami, Florida 33131

TITLE  DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

D/V  Change  Addition

11 NAME Mendez Mendez, Carlos Felipe  
 12 NAME  
 13 STREET ADDRESS 2750 N.W. 84th Avenue  
 14 CITY-ST-ZIP Miami, Florida 33122

21 TITLE  Change  Addition

22 NAME 100002881061 - - 1  
 23 STREET ADDRESS -05/20/99 -01049--012  
 24 CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25

31 TITLE  Change  Addition

32 NAME  
 33 STREET ADDRESS  
 34 CITY-ST-ZIP

41 TITLE  Change  Addition

42 NAME  
 43 STREET ADDRESS  
 44 CITY-ST-ZIP

51 TITLE  Change  Addition

52 NAME  
 53 STREET ADDRESS  
 54 CITY-ST-ZIP

61 TITLE  Change  Addition

62 NAME  
 63 STREET ADDRESS  
 64 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, with all other like empowered.

SIGNATURE: Maurizio Durante

5/10/99

CR2E034 (11/98)