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

FILED
Apr 29, 1999 8:00 am
Secretary of State
04-29-1999 90035 024 ***150.00

0209392

DOCUMENT # S91671

1. Corporation Name
O. K. INTERNATIONAL TRADING, INC.

Principal Place of Business	Mailing Address
925 STILLWATER DR. MIAMI BCH. FL 33141	925 STILLWATER DR. MIAMI BCH. FL 33141

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 300 71st STREET Suite, Apt. #, etc. 22 SUITE 520 City & State 23 MIAMI BEACH Zip 24 FL 33141 Country 25 USA	2a. Mailing Address 26 300 71st STREET Suite, Apt. #, etc. 27 SUITE 520 City & State 28 MIAMI BEACH Zip 29 FL 33141 Country 30 USA

3. Date Incorporated or Qualifed: 11/04/1991

4. FEI Number: 65-0299411 ☐ 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 owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KRILOV, ALIM A.
925 STILLWATER DR.
MIAMI BCH. FL 33141

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. am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KRILOV, ALIM A.		1.2 NAME		
STREET ADDRESS	925 STILLWATER DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	KRILOV, ALIM A.		2.2 NAME		
STREET ADDRESS	925 STILLWATER DR.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH. FL		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FARSON, MARK T		3.2 NAME		
STREET ADDRESS	955 STILLWATER DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BCH FL		3.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	KRILOV, OLGA		4.2 NAME		
STREET ADDRESS	925 STILLWATER DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
ST-ZIP			6.4 CITY-ST-ZIP		

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.

IRE: ALIM KRILOV PRESIDENT 04-26-99 (305) 868 hong
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)