FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
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 MIAMI FL 33147	6411 N.W. 35TH AVENUE 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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
(Signature of new registered agent, if appointed) (NOTE: Registered Agent signature required when mandatory)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	HOFLAND, HERMAN W.	12 NAME	
STREET ADDRESS	HENDRIKLAAN 6	13 STREET ADDRESS	
CITY-ST-ZIP	CURACAO, NETH., ANT.	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	WIENK, J.	22 NAME	No Vice-president anymore
STREET ADDRESS	MALMOKWEG 21	23 STREET ADDRESS	Mr. J. Wienk resigned
CITY-ST-ZIP	ARUBA, NETH., ANT.	24 CITY-ST-ZIP	
TITLE	T	31 TITLE	T ☐ Change ☐ Addition
NAME	KNETSCH, A.	32 NAME	Schoen G.
STREET ADDRESS	FERGUSONSTRAAT 76	33 STREET ADDRESS	Nauritslaan 3
CITY-ST-ZIP	ARUBA, NETH., ANT.	34 CITY-ST-ZIP	Curacao Netherlands Antilles
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	VISSCHER, J. JONGH	42 NAME	
STREET ADDRESS	WARAWARAWEG 10	43 STREET ADDRESS	
CITY-ST-ZIP	CURACAO, NETH., ANT.	44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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 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.

SIGNATURE: J. Jongh Visscher 31/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF [illegible] DIRECTOR — Date — Daytime Phone #

0181160 CR