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 # P98000050119

GULINO TRADING, CORP.

Principal Place of Busine
4209 MONROE STREET
HOLLYWOOD EL 22021

Mailing Address

4209 MONROE STREET

FILED Feb 19, 1999 8:00am **Secretary of State**

02-19-1999 90002 024 ***150.00



HOLLYWOOD FL 33021		HOLLYWOOD FL 33021		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed 06/03/1998	
2. Principal Place of Business 2a. Mailing Add			Address		4. FEI Number	Applied For
1		26			65-0845431	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
2		27			C. Collinate of States Dones	Fee Required
City & State	е	City & State			6. Election Campaign Financing	\$5.00 May Be
3		28			Trust Fund Contribution	Added to Fees
Zip	Country Zip Co		Cou	ntry	8. This corporation owes the current year	
4	25 29		30		Personal Property Tax.	Pres □No
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registers	d Agent
C 111	INO AMBADO			81 Name		
	INO, AMPARO			82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
	MONROE STREET					
HOL	LYWOOD FL 33021			83		•
				84 City		85 Zip Code
				O4 City	F	L S Zip Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	authorized Torida Stati	by the corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the apparent when reinstation).	pointment as registered
	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	Agent signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIDECTORS IN 12
12.	PS OFFICERS AN	DELETE	1.1 TIT	16	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE						
NAME	GULINO, AMPARO		1.2 NA	REET ADDRESS		
STREET ADDRESS	4209 MONROE STREET					
CITY-ST-ZIP	HOLLYWOOD FL 33021			ry-st-zip		Change Addition
TITLE	VPT		DELETE 2.1 ΠΤ			□ Change □ Addition
NAME	GULINO, ROBERTO		2.2 NA			
STREET ADDRESS	4209 MONROE STREET	· · · · · · · · · · · · · · · · · · ·		REET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33021			TY-ST-ZIP		CT Change CT Addition
TITLE		☐ DELETE	3.1 TI	le		☐ Change ☐ Addition
NAME			3.2 NA	ME		
STREET ADDRESS			3.3 \$1	REET ADDRESS		
CITY-ST-ZIP			3.4. C	TY-ST-ZIP		
TITLE		☐ DELETE	4,1 111	LE	- The state of the	☐ Change ☐ Addition
NAME			4. 2 N	ME.		
STREET ADDRESS			4.3 ST	REET ADDRESS		
CITY-ST-ZIP			4.4 CI	Y-ST-ZIP		
TITLE		☐ DELETE	5.1 TIT			☐ Change ☐ Addition
NAME			5.2 NA	ME		
STREET ADDRESS			5.3 ST	REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	6.1 TI	LE		☐ Change ☐ Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET ADDRESS		
			6400	V-ST-7ID		,

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 charged, or on an attactment with an address, with all other the empowered.

SIGNATURE:

01-06-99