Applied For

Fee Recuired \$5.00 May Be

Not Applicable \$8.75 Additional

FULE 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 # F9700005683

WEIMAR	TRADING CORP.					
Principal Place	of Business	Mailing Address				
1 SE 3RD A'/E MIAMI FL 33131	#1980	1 SE 3RD AVE #11 MAMI FL 33131	980			
				DO NOT WRI		
				3. Date Ir corporated or Qualifed 10/28/1997		
Principa Place of Business Total		2a. Mailing Address	S	4. FEI Number NOT APPLICABLE		
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, et	tc.	5. Certificate of Status Desired		
City & State	•	City & State		Election Campaign Financing Trust Fund Contribution		
Zip	Country	Zip	Country 30	This corporation owes the currence Personal Property Tax.		
	9. Name and Address of			10. Name and Address of New f		
AMKO	GS REGISTERED AGENTS	. INC.	81 Name			

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90173 032 ***150.00



DO NOT WRITE IN THIS SPACE

23			28				Trust Fu	and Contribution		Adde	ed to Fees
Zip	Count	ry	Zip		Country	1	8. This cor	poration owes the cu	rrent year In	tangible	
24	25		29	30				I Property Tax.		☐ Yes	[]No
	9. Name and Addr	ess of Current I	Registered Agen				10. Name a	nd Address of New	Registered	Agent	
					81	Name					
AMK	GS REGISTERED A	gents, Inc.			82	Stroot Acds	roce /D O Boy	Number is Not Accep	ntable)		<u></u>
1980	SUNTRUST INTER	NATIONAL CTF	₹.		62	Street Acui	1633 (1.0. 00)	(4d) (bot is rice riceo)	, abio,		
ONE	SE 3RD AVE.				83						
MIAN	VI FL 33131				_					lor 1	ip Code
					84	City			Fl	_ 85 Z	ip Code
office or r	to the provisions of Se egistered agent, or bo im familiar with, and ac	h in the State of	Florida, Such cha	inge was auth	orized by	the corporation	oration submits on's board of c	s this statement for the rectors. I hereby acc	ept the appo	f changing intment as	its registered registered
SIGNATURE	Signature, typed or printed na	ne of registered agent a	ind title if applicable	(NOT :: Re	gistered Age	nt signature require	ed when reinstating)		DATE		
12.		OFFICERS AND			13.		ADDITIO	NS/CHANGES TO C	FFICERS		
TITLE	PD			DELETE	1.1 TITLE					Chan	ge 🗌 Additio
NAME	ABALLI, ARTURO	J JR			12 NAME	1					
STREET ADDRE 3S					1.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL 33131				14 CITY-S	ST-ZIP					
TITLE	S			DELETE	2.1 TITLE					☐ Chan	ge 🔲 Additio
NAME	FERNANDEZ, CAF	NDAD			22 NAME	Ì					
STREET ADDRESS					2.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL 33131				2 4 CITY-	ST-ZIP					
TITLE	INTO TE COTO			DELETE	3.1 TITLE					Chan	ge 🔲 Additio
NAME					32 NAME						
STREET ADDRE 3S					3.3 STREE	T ADDRESS					
CITY-ST-ZIP					3.4. CITY-	ST-ZIP					
TITLE				DELETE	4.1 TITLE					☐ Chan	ge Additio
NAME					4. 2 NAME						
STREET ADDRESS						TADDRESS					
					4.4 CITY-5						
TITLE				DELETE	5.1 TITLE					Chan	ge 🔲 Additio
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREE	T ADDRESS					
					54 CITY-5	ST-ZIP					
CITY-ST-ZIP TITLE	 			DELETE	6.1 TITLE					☐ Chan	ge Additio
NAME	-			•	6.2 NAME						
	1				63 STREE	T ADDRESS					
	1					- 1					
STREET ADDRE 3S					6.4 CITY-5	ST-ZIP					

Block 12 or Block 13 if changed. an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/-16-98

311-373-6600