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Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 523519 (7)
1. Corporation Name
INTERNATIONAL TRADING CORPORATION OF TAMPA, FLOR
IDA

Principal Place of Business Mailing Address
6379 ALDERWOOD ST 6379 ALDERWOOD ST
SPRING HILL FL 34806 SPRING HILL FL 34806

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/11/1977
4. FEI Number
59-1712874
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 or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 25 Country 29 Country 30 Country

9. Name and Address of Current Registered Agent
NEWELL, WILLIAM D
6379 ALDERWOOD ST
SPRING HILL FL 34806
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 NAME ☐ DELETE
VD NEWELL, MARTIN E
STREET ADDRESS 15111 MANOR HILL DR
CITY-ST-ZIP HOUSTON, TEXAS 00000
TITLE NAME ☐ DELETE
SD NEWELL, CAROL M
STREET ADDRESS 6379 ALDERWOOD ST
CITY-ST-ZIP SPRING HILL, FL 00000
TITLE NAME ☐ DELETE
VD STOCKFORD, JOYCE
STREET ADDRESS 6379 ALDERWOOD ST
CITY-ST-ZIP SPRING HILL, FL 00000
TITLE NAME ☐ DELETE
PTD NEWELL, WILLIAM D
STREET ADDRESS 6379 ALDERWOOD ST
CITY-ST-ZIP SPRING HILL, FL 00000
TITLE NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP
TITLE NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE:

[Handwritten Signature] 2.28.98

CR2E034 (10/97)