

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 07, 1999 8:00 am
Secretary of State
09-07-1999 90012 012 ***558.75

DOCUMENT # **554071** ✓
Corporation Name
QUESO TRADING CORP.



Principal Place of Business	Mailing Address
N.W. 23RD ST. MI FL 33127	1090 N.W. 23RD ST. MIAMI FL 33127 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/10/1977	
4. FEI Number 59-1774397	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input type="checkbox"/> No	

Principal Place of Business 7455 NE 2nd Ave	2a. Mailing Address 7455 N.E. 2nd Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State Miami, FL	City & State Miami, FL
Zip 33138	Zip 33138
Country	Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
TEJEIRO, JOSE A. 4900 S. W. 7TH ST. MIAMI FL 33134		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	85 Zip Code
		FL	

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		(NOTE: Registered Agent signature required when reinstating)		DATE	
Signature, typed or printed name of registered agent and title if applicable.					
OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
ET ADDRESS	PD TEJEIRO, JOSE A. 4900 S. W. 7TH ST. MIAMI FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		1.2 NAME			
		1.3 STREET ADDRESS			
		1.4 CITY-ST-ZIP			
ET ADDRESS	STD TEJEIRO, LUIS A. 4900 S. W. 7TH ST. MIAMI FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		2.2 NAME			
		2.3 STREET ADDRESS			
		2.4 CITY-ST-ZIP			
ET ADDRESS		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		3.2 NAME			
		3.3 STREET ADDRESS			
		3.4 CITY-ST-ZIP			
ET ADDRESS		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		4.2 NAME			
		4.3 STREET ADDRESS			
		4.4 CITY-ST-ZIP			
ET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		5.2 NAME			
		5.3 STREET ADDRESS			
		5.4 CITY-ST-ZIP			
ET ADDRESS		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
ST-ZIP		6.2 NAME			
		6.3 STREET ADDRESS			
		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.

SIGNATURE: Sig Jose Tejeiro **9/13/99** **305-786-7139**

CR2E034 (5/99)