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 Mar 17, 1999 8:00 am Secretary of State 03-17-1999 90098 003 ***150.00

DOCUMENT # G10285

1. Corporation Name

DORADO INTERNATIONAL TRADING COMPANY

Principal Place	of Business	Mailing Address			. 10 BL 1 BL
9600 SW 8TH ST		9600 SW 8TH ST			
48		48		DO NOT WRITE IN THIS SPACE	
MIAMI FL 33174 US		MIAM) FL 33174 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed	
US		00		10/28/1982	
2 Principal PI	ace of Business	2a. Mailing Address	<u></u>		Applied For
21		26		59-2274815	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		I = Cadiforto of Status Decired 1.1	5 Additional
22		27		Fee	Required
City & State		City & State		, - , ,	May Be
Zip Country		Zip Country		Trust Fund Contribution Adde 8 This corporation owes the current year Intangible	d to rees
Zip	25	29 30	7	Personal Property Tax.	□No
24	9. Name and Address of Current		<u> </u>	10. Name and Address of New Registered Agent	
			81 Name	DORADO, JOSE M	
DORADO, JOSE M ADDRESS			82 Street	Address (P.O. Box Number is Not Acceptable)	<u> </u>
DORADO, JOSE M 6742 NW 72 AVE. MIAMI FL 33163 PLS. DELETE				9600 SW 8th Dt NG 48	
MAN	II FL 33163 / PLS.	DELETE	83	, ,	
			84 City	11A-MI FL 85 Z	ip Code 33/74
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 r	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auth	orized by the corbo	oration's board of directors. I hereby accept the appointment as	registered
SIGNATURE		Dreinbert		3/12/99	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re-	gistered Agent signature r	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	
TITLE	DPS 100F H	☐ DELETE	1.1 TITLE	- Orland	je
NAME	DORADO, JOSE M		1.2 NAME		
STREET ADDRESS	9600 SW 8TH ST STE 48 MIAMI FL 33174		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	VI	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	☐ Chan	ge Addition
NAME	DORADO, OLGA L		2.2 NAME		
STREET ADDRESS	9600 SW 8TH ST. STE 48		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33174		2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE	Chan	ge Addition
NAME			3.2 NAME	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS	· 		3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Chan	ge Addition
TITLE		☐ DELETE	4.1 TITLE	Collain	ge Addition
NAME			4. 2 NAME	Į.	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Chan	ge
TITLE		ا اعتاد ا	5.2 NAME		
NAME STREET ADDRESS	`		5.3 STREET ADDRESS	·	
CITY-ST-ZIP			5.4 CiTY-ST-ZIP		
TITLE		☐ DELETÉ	6.1 TITLE	☐ Chan	ge Addition
NAME		ţ	6.2 NAME	1	

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS