FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14 1998 8:00am Secretary of State

(305) 541-7468

1. Corporatio	MENT # G296 4 THER TRADING CORP.	43 (5)				1/ 4/2/ 0/2/ 1/10 1/4/ 1/4
Principal Plac	e of Business	Mailing Address				AIX OIOIN BION BION BIEN IDAN
3152 NW 77H ST 3152 NW 7TH ST						
MIAMI FL 33125		MIAMI FL 33125		DO HOT WESTE ALTUS OF OF		
					DO NOT WRITE IN THIS: 3. Date Incorporated or Qualified	SPACE
					03/04/1983	
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For	
26				59-2268069	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional	
22 27		27]			b. Certificate of Status Desired	Fee Required
		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			1rust Fund Contribution	Added to Fees
Zip	Country Zip		Cour	ury	8. This corporation owes or has paid the cur	rent year Intangible Yes 🔲 No
24	25 25 Name and Address of Curre	29 nt Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	7
	SANCHEZ, LUISA	The state of the s		81 Name		
6436 SW 10TH ST					(0.0 D	·····
MIAMI FL 33144				82 Street A	ddress (P.O. Box Number is Not Acceptable)	
,,			Į:	B3		
			-	84 City		85 Zip Code
					FL	. ` `
11, Pursuant office or ragent. La	ım lam ılıaı with, and accept the obliç	ations of, Section 607.0505, F	lorida Statu	itos.	corporation submits this statement for the purpose of pration's board of directors. I hereby accept the app	changing its registered ointment as registered
40	Signature, typest or printed name of registered ag			Agent signature r	equired when reinstating) DATE	N DIDECTORS IN 10
12. Title	PD OFFICERS AN	ID DIRECTORS	13. 1.1 Dit	·	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	SILVA, ROBERTO P.	2.5 (1.2 NA	1		
STREET ADDRESS	7928 W. DR. PH 8			EET ADDRESS		
CITY-S1-ZIP	MIAMI FL		1	Y - S1 - ZIP		
TITLE	VD	DELETE	2.1 1/11			Change Addition
NAME	SILVA, ROBERTO M			At		
STREET ADDRESS			2.3 S1H	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL			Y-ST-ZIP		
TITLE	\$D	[]] DEFEIE	3.1 TITL	E		Change Addition
NAME	SANCHEZ, LUISA		3.2 NA	1		
STREET ADDRESS	6436 SW 10TH ST			FFT ADDRESS		
CITY-ST-ZIP	MIAMI FL			Y - ST - Z(P		Change Addition
TITLE				1		L Change L Addition
NAME OTDEET ADDRESS			4.2 N			
STREET ADDRESS				EFT ADDRESS Y-ST-71P		
CITY-ST-ZIP TITLE			5.1 TITU			☐ Change ☐ Addition
NAME			5.2 NAM			- —
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP				7-S1-ZIP		
TITLE		DELETE	611III			Change Addition
NAME			6.2 NAM	AE		
STREET ADDRESS			6.3 STR	EE1 ADDRESS		
CITY-ST-ZIP			6.4 CI1	Y-ST-ZIP		

14. Thereby 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 or an attack great with an address.

4-6-98