## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

(3)

CTC CENTRUN TRADING, CORP.

Principal Place of Business		Muiling Address			
1036 S. MIAMI AYE. MIAMI FL 33130-1109		1036 S. MIAMI AVE. MIAMI FL 33130-1109			
				3. Date Incorporated or Qualified 04/25/1983	3a. Date of Last Report 08/03/1995
	ace of Business	2a. Mailing Address		4. FE Number	Applied For
21 Suite, Apt.	# etc	26 151 Majo	rca Aue.	59-2317422	Not Applicable
22		Suite, Apt. #, etc. 7 27 Suite C		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	······································	City & State  28 Coral Gal	des, FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ <b>24</b>	Gountry	Zip Aalau	Country	8. This corporation has liability for a	
24	25 9. Name and Address of Current	<sub>29</sub>	30] USA	Florida Statutes	No
	5. Flame and Address of Correct	negistered Agent	81 Name	10. Name and Address of New Re	egistered Agent
DOATE	S, GABRIEL		of Marile		
151 MAJORCA AVENUE				ddress (P.O. Box Number is Not Acceptabl	e)
SUITE C			83		
	L GABLES FL 33177				
L			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 and agent, or both, in the State of Florid	and 607.1508, Florida Statutes,	the above named con	poration submits this statement for the purp	
familiar wit	th, and accept the obegations of, Section	n 607.0505, Florida Statutes	by the corporation's by	voration submits this statement for the purposard of directors. Thereby accept the appo	intriient as registered agent. Lan
SIGNATURE	•				
12.	Sky after type by peate from strength on a gent a OF FICERS AND		He godern I Agent Sapart por se j		31AC
TiTLE	• PD	TI DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
NAME	CALZA, CARLOS E		1.2 NAME		Change Addition
STREET ADDRESS	1036 S. MIAMI AVE.		13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		14 City - ST - ZiP		
TITLE	VS	☐ DELETE	2 1 TITLE		Change Addition
NAME	Calza, Carlos e		2.2 NAME		C Onenge C Floor Sir
STREET ADDRESS	1036 S MIAMI AVE		2.3 STREET ADDRESS		
City-St-ZiP	MIAMI FL		2.4 CiTy - S1 - ZiP		
TIFLE	VS	□ DELFIE	3 1 TITLE		Change Addition
NAME	COSTA-CALZA, EGLE M		3.2 NAME ~		
STREET ADDRESS	1036 S MIAMI AVE		3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	MIAMI FL	Distric	3401Y-S!-Z:P		
NAME		☐ DELĒTE	4 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELETE	5 1 TITLE		
NAME		□ peccir		တစ္တတ္တစ္တစ္တစ္ နည္တ	4720age Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	-07/05/960103	3U019
CITY-ST-ZIP				***208.75	
TIFLE		DELETE	5.4 CHY+S1+ZIP 6.1 TITLE	and the state of t	
NAME			6.2 NAME	10000188	Addition Addition
STREET ADDRESS			6.3 SIPEET ADDRESS	-07/05/960103	iuU2U
A177 A1 719			V 2 STIPLET AL/UNESS	***25.08	

6.4 CI\* t - S¹ - Zi≥

SIGNATURE:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 acceptant in Block 12 or Block 12 o NING OFFICER OR DIRECTOR

305)371-7337

Die