

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **G63969** (1)

1. Corporation Name

**INTER-CARIBBEAN TRADING CORPORATION**

Principal Place of Business

**7800 SW 57TH AVENUE  
SUITE 207B  
MIAMI FL 33143  
US**

Mailing Address

**7800 SW 57TH AVENUE  
SUITE 207B  
MIAMI FL 33143  
US**



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**LOGAN, FRANK C.  
400 CLEVELAND ST.  
CLEARWATER FL 33515**

3. Date Incorporated or Qualified

**10/06/1983**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**59-2344702**

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 has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81

Name

**Whetstone, Charles**

82

Street Address (P.O. Box Number is Not Acceptable)

**c/o Harper, Van Scoik & Company, L.L.P.**

83

**2111 Drew Street**

84

City

**Clearwater**

FL

85

Zip Code

**34625**

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, 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]*

(Print Name of Registered Agent) *Charles Whetstone*

*May 30, 1996*

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

**SCOTT, GARTH A.  
7725 S.W. 171 TERR.  
MIAMI FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

C

NAME

**SCOTT, OWEN A.  
17015 S.W. 83RD CT.  
MIAMI FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

ST

NAME

**SCOTT, SONIA M.  
17015 S.W. 83RD CT.  
MIAMI FL**

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PD

1.2 NAME

**Scott, Owen A.**

1.3 STREET ADDRESS

**279 Spanish Town Road**

1.4 CITY - ST - ZIP

**Kingston 11, Jamaica, W.I.**

2.1 TITLE

VD

2.2 NAME

**Scott, Garth A.**

2.3 STREET ADDRESS

**279 Spanish Town Road**

2.4 CITY - ST - ZIP

**Kingston 11, Jamaica, W.I.**

3.1 TITLE

STD

3.2 NAME

**Scott, Sonia M.**

3.3 STREET ADDRESS

**279 Spanish Town Road**

3.4 CITY - ST - ZIP

**Kingston 11, Jamaica, W.I.**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

**700001857407  
-06/11/96--01014--030  
\*\*\*200.00**

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 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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*April 23, 1996 (305) 661.4646*

Date Daytime Phone

CR2E034 (12/95)