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FILED

Jan 21 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # G79977 (6)

1. Corporation Name
INTERNATIONAL TRADING & CONSULTING, INC

Principal Place of Business
2333 BRICKELL AVE. #717
MIAMI FL 33129
US

Mailing Address

~~**2333 BRICKELL AVE. #717**~~
~~**MIAMI FL 33129-2441**~~
~~**US**~~

VIPSAL No. 1066
P.O. BOX 52-5364
MIAMI, FL 33152-5364



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

3. Date Incorporated or Qualified
01/18/1984

3a. Date of Last Report
02/14/1996

4. FEI Number

59-2366544

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

9. Name and Address of Current Registered Agent

ALFAG, INC
2333 BRICKELL AVE. #717
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 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 of Registered Agent

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **SD** ☐ DELETE
NAME **ALVAREZ, JAVIER**
STREET ADDRESS **2333 BRICKELL AVE. #717**
CITY- ST- ZIP **MIAMI FL**

TITLE **PD** ☐ DELETE
NAME **ALVAREZ, ALFONSO G.**
STREET ADDRESS **2333 BRICKELL AVE. #717**
CITY- ST- ZIP **MIAMI FL**

TITLE **D** ☐ DELETE
NAME **ALVAREZ, ALFONSO L.**
STREET ADDRESS **2333 BRICKELL AVE. #717**
CITY- ST- ZIP **MIAMI FL**

TITLE **D** ☐ DELETE
NAME **HERNANDEZ, HECTOR**
STREET ADDRESS **2333 BRICKELL AVE. #717**
CITY- ST- ZIP **MIAMI FL**

TITLE **TD** ☐ DELETE
NAME **ALVAREZ, DIEGO**
STREET ADDRESS **2333 BRICKELL AVE. #717**
CITY- ST- ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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:

ALFONSO ALVAREZ G., PRESIDENT 1/10/97 (305) 858-3444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone: #

CR2E034 (9/96)