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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

J21425

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DOCUMENT #

ACC TRADING, INC. Principal Place of Business Mailing Address % ROLAND LANGEN % ROLAND LANGEN 112 S. MENOCUS ISLAND MATHER 33139 112 S. HIBISCUS ISLAND 100A001 FL 33139 ANYONEO DE CENVERKA 1750 W. 46th St. Apt. 408 HIALEAH, FL. 33019 1854 3a. Date of Last Report 04/20/1995 06/25/1986 or Qualified Applied For 4. FEI Numbe 2. Principal Place of Business 2a. Mailing Address 59-2684758 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #. etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s. 199.032, Zφ $Z_{\rm ID}$ Country Yes No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name OLIVEIRA, ANTONIO DE Street Address (P.O. Box Number is Not Acceptable) 82 1750 W. 46TH ST. **STE 406** 83 HIALEAH FL 33012 Zip Code 85 84 City 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, typed or printed han e of responsed agent and little claps to absolute (NOTE: Buy steed Agent's gration to pined when reinstalling-(12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 ■ Addition DELE'I 1 1 TU; F TITLE CARBONE, ANTONIO CARLOS CR2E034 1.2 NAME NAME 444 BRICKELL AVE, S-M128 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY - S1 - ZIP CITY - ST - ZIP ["] DELETE 2 1 THEF ☐ Change Addition TITLE CARBONE, MEIRE P.A. 2.2 NSM: NAME 444 BRICKELL AVE, S-M128 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZiP 24 CITY - ST. Zi² DELETE ☐ Change Addition 3 1 TITLE THILE **OLIVEIRA, ANTONIO** 3.2 NAME NAME 444 BRICKELL AVE, S-M128 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 3.4 CHY S1-2F CITY - ST - ZIP Change Addition DELETE 4.13000 TrTLE NAMÉ 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4.C-TY - ST - ZiP CITY-ST-ZIP [DELETE Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ACCRESS STREET ACORESS 5.4 CiTy - \$1 - 719 CITY - ST-ZIP **2000017777付還。** -04/12/96--01011--006 DELETE TITLE 62 NAME , NAME ***200.00 6.3 STREET ADDRESS STREET ADORESS € 4 C(TY - S1 - Z)P CITY-ST-ZIP 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 supplienental 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 coryoration or this project or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changes from an attack from with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OF DIRECTOR PLIVEIRIG BINTONIO 27.77

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