| DOCUMENT # K13669 INTERNATIONAL PREMIUM & TRADING COMPANY International Present States in the strate strates in the strates in   | PROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1999</b>  | Kathe<br>Secre<br>DIVISION O                         | PARTMENT OF STATE<br>erine Harris<br>etary of State<br>OF CORPORATIONS   | FILED<br>Feb 04, 1999 8:00am<br>Secretary of State  |                   |
|--|--|--|--|---|-------------------|
| INTERNATIONAL PRÉMIUM & TRADING COMPANY  Incipal Place of Busines I toll PLACERS AV ICON LOAKES FL 33191 I DO NOT WRITE IN THIS SPACE I DO NOT WRITE IN THIS SPAC   | OCUMENT # K1366  | 69   |  | 02-04-1333 30002 011 130.00   |                   |
| Integrat Process of Business     Mailing Address       ID ProCIPAS WE<br>JITE 600     SUPE 600       Silver, RAL CARLES R, 33131     DO NOT WRITE IN THIS SPACE       Principal Place of Business     2a. Mailing Address       Principal Place of Business     2a. Mailing Address       Sale. Apt. R, etc.     27       Solute, Apt. R, etc.     27       City & State     5. Contribute of Status Desired       Zip     Country       2a     Solute, Apt. R, etc.       27     Country       28     City & State       29     Country       29     Country       20     Country       21     Country       22     Country       23     Country       24     State Address (P.O. Box Number is Not Acceptable)       25     State Address (P.O. Box Number is Not Acceptable)       26     Country       27     Country       28     State Address (P.O. Box Number is Not Acceptable)       30     The copportation over the country team integraphered is Not Acceptable)       31     State Address (P.O. Box Number is Not Acceptable)       32     State Address (P.O. Box Number is Not Acceptable)       33     The copportation over the participation of the control over the cont  | · · · ·  | ADING COMPANY  |  | I TREVILLE AND THE AND THE AND  |                   |
| Dip PACEIAS ANC       SUIT FACEIAS ANC         Similar E 600       CORAL GABLES FL 33131         Do NOT WRITE IN THIS SPACE         Precipied Place of Business       20.         Mailing Address       4. FEI Mumber         State. Apt. R, etc.       28.17.5 Automatic         State. Apt. R, etc.       28.17.6 Automatic         City & State       21.0 Centrate of Status Dasired         City & State       21.0 Centrate of Status Dasired         City & State       21.0 Centrate of Status Dasired         20       Control         20       Control         20       Control         20       Control         21       Control         22       Country         23       Country         24       Country         25       Country         26       Country         27       Country         28       State Automatics (P.O. Box Number is Not Acceptable)         29       Country         29       Country         20       Country         21       Name and Address of Country Replaced Agent         30       Correlate Address (P.O. Box Number is Not Acceptable)         20       Country   | ringinal Place of Business   | Mailing Address                                      |  |   |                   |
| Principal Place of Business       Za.       Mailing Address       4. FEI Number       Applied Fort         Suite, Apt. #, etc.       2       Suite, Apt. #, etc.       3       3       3       7       Applied Fort       Not Application         City & State       2       Current Verification       7       7       Required       1       Not Application         Zip       Country       2       Country       8. This coopcation owns the current verification       Address of Stational Tree Not Application         Yes       Solid       2       Country       8. This coopcation owns the current verification       Address of New Registered Agent         GAVIRIA, ANDRES       9       Name and Address of New Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         GAVIRIA, ANDRES       9       Name       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         GAVIRIA, and Cell       10. State St  | 01 PIACETAS AVE<br>JITE 850<br>DRAL GABLES FL 33131  | 1201 PLACETAS AV<br>SUITE 850<br>CORAL GABLES FL 331 | 31   |   |                   |
| Principal Place of Busines         2a. Malling Address         4. FEI Number         Applied For           Suite, Apt. #, etc.         26         Suite, Apt. #, etc.         65:0026479         Not Applicational<br>For Applied For           City & State         27         Country         27         Country         8. This cooprotion overs the current year Intargible<br>Personal Property Tax.         10: Apt. # pict.           Zip         Country         2. The Main Place of Status Desired         Fis. Place of Main  | 3  | US   |  |   |                   |
| Suite, Apt, #, etc.       Suite, Apt, #, etc.       Suite, Apt, #, etc.       Suite, Apt, #, etc.       State       State       Pres Required         City & State       City & State       City & State   | Principal Place of Business  |  |  | 4. FEI Number Applied For   |                   |
| City & State         Site City & State         City & State         City & State         Site City & State         City & State <t< td=""><td>Suite, Apt. #, etc.</td><td></td><td></td><td>\$8,75 Additional</td><td>le</td></t<>   | Suite, Apt. #, etc.  |  |  | \$8,75 Additional   | le                |
| Zip     Country     Zip     Country     Its     Trust Fund Contribution     Added to Fees       Zip     Country     Its     The compation owes the current year intangible     Ives  | City & State   |  |  | Fee Required  | =:                |
| Image: search Applese of Currom Registered Agent     10. Name and Address of New Registered Agent       Image: search Applese of Currom Registered Agent     10. Name and Address of New Registered Agent       GAVIRIA, ANDRES     81       120. TPLACETAS AVE     82       Street Address (P.O. Box Number is Not Acceptable)     10. Name and Address (P.O. Box Number is Not Acceptable)       120. TPLACETAS AVE     83       13. Mame and Address (P.O. Box Number is Not Acceptable)     14       14. Transmittor the provisions of Sections (M. Sections and 507) 1502. Florida Statutes, the above named corporation submits his statement for the purpose of changing its registered agent, no topical Statutes and diffectors. Interdy accept the apploitment as registered agent, no topical Statutes and diffectors. Interdy accept the apploitment as registered agent, no topical Statutes and diffectors. Interdy accept the apploitment as registered agent, no topical Statutes and address of New Registered Agent agent agent and registered agent and the apploitment as registered agent age   |  | 28   | Country  | Trust Fund Contribution Added to Fees   |                   |
| GAVIRIA_ANDRES     81     Name       1201 PLACETRS-AVE<br>STE 3100<br>CORAL GABLES FL 33(46     82     Street Address (P.O. Box Number is Not Acceptable)       83     84     City     FL     85     Zip Code       17. Pursuant to the provisions of Sactions & MU 8:02 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered<br>agent: 1 am familiar with, and accept the subgrations of Sactions & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered<br>agent: 1 am familiar with, and accept the subgrations of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered<br>agent: 1 am familiar with, and accept the subgrations of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered<br>agent: 1 am familiar with, and accept the subgrations of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered<br>agent: 1 am familiar with, and Acceptable.     DATE       2     OFFICERS AND DIRECTORS IN 12     Internet the approximate and and accept the appointment as registered<br>approximate and applications of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the appointment as registered<br>application and magnification of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. Thereby accept the application and the application of Saction & VO 7050, Florida Statutes, the above named corporation's board of directors. The accept the application of Sacecotable.       10     DELETE  | 25   | 29   |  |   |                   |
| 1201 PLAGETAS AVE<br>STE 3100       82       Street Address (P.O. Box Number is Not Acceptable)         83       84       City       FL         84       City       FL       85       Zip Cade         84       City       FL       85       Zip Cade         84       City       FL       85       Zip Cade         85       City       FL       85       Zip Cade         86       City       FL       85       Zip Cade         86       City       FL       85       Zip Cade         87       Corrects Statement for the purpose of changing its registered       86       City       FL         88       City       FL       Corrects Statement for the purpose of changing its registered       1001110000000000000000000000000000000   | 9. Name and Address of Cu  | rrient Registered Agent                              | 81 Name  | 10. Name and Address of New Registered Agent  | <u> </u>          |
| STE 3100<br>CORAL GABLES FL 33:46       B3         B4       City       FL       B5       Zip Code         F- Pursuant to the provisions of Sections 40X, B5C2 and 507, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered<br>office or registered again. C about, in the Atter of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered<br>office or registered again. C about, on the Atter of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered<br>office or registered again. C about of directors. Interestivation of Gene (Florida Statutes, The above-named corporation stood of directors. Interestivation<br>of CONTROL (CONTROL OF CONTROL OF CONT  |  | Antonia  | 82 Street Add  | ress (P.O. Box Number is Not Acceptable)  | _                 |
| B4     City     EL     B5     Zip Code       1. Pursuant to the provisions of Sections GML B502 and 6071 IS08. Floridal Statutes, the above-named corporation's board of directors. In hereby accept the appointment as registered agent, or both, in the State of Floridal Statutes. The above-name decorporation's board of directors. In hereby accept the appointment as registered agent, or both, in the State of Floridal Statutes.       IGNATURE     Image: State of Printed State of   | 1201 PLAKETASAVE   |  | 1  |   |                   |
| In Pursuant to the provisions of Sociated M2L BOI2 and 6071 508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I and social statutes are applied to 2005. Florida Statutes.         IGNATURE       Signation, specific optimal and or statutes.       I.S. Y.   | STE 3100   |  | 83   |   | <del>4</del>      |
| ME GAVIRIA, ANDRES REETADORESS REETADORESS REETADORESS CORAL GABLES FL I 2 NAME I 201 PLACETAS AVE I 201 PLACETAS AVE I 201 PLACETAS AVE CORAL GABLES FL I C I 2 NAME I 2 NAME REETADORESS I 2 NAME I 2 N   | CORAL GABLES FL 33146  | 9502 and 607, 1508, Florida Sta                      | 84 City  | FL   T  | Z ALLON A         |
| REET ADDRESS<br>Y-ST-ZP<br>CORAL GABLES FL<br>LE<br>ME<br>ME<br>ME<br>ME<br>ME<br>ME<br>CTADDRESS<br>Y-ST-ZP<br>LE<br>LE<br>ME<br>CTADDRESS<br>Y-ST-ZP<br>LE<br>ME<br>Change<br>Addition<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>At ITTLE<br>Change<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>ME<br>Addition<br>ME<br>Addition<br>ME<br>Change<br>Addition<br>Addition<br>Addition<br>ME<br>Change<br>Addition<br>Addition<br>Addition<br>ME<br>S2 NAME<br>AS CTY-ST-ZP<br>Change<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>Addition<br>ME<br>S2 NAME<br>S3 STREET ADDRESS<br>Y-ST-ZP<br>Addition<br>S2 NAME<br>S3 STREET ADDRESS<br>Y-ST-ZP<br>Change<br>Addition<br>S2 NAME<br>S3 STREET ADDRESS<br>S3 ST | CORAL GABLES FL 33146<br>Pursuant to the provisions of Sections dut<br>office or registered agent, or both, in the S<br>agent: I am familiar with, and accept the a<br>IGNATURE<br>Signature, typed or printed name of registres   | d and title / applicable. (NC                        | 84 City<br>s authorized by the corporati<br>Florida Statutes.  | FL         poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered in the statement of the state |                   |
| ILLE   | CORAL GABLES FL 33146<br>1. Pursuant to the provisions of Sections dut<br>office or registered agent, or both, in the S<br>agent: I am familiar with, and accept the a<br>IGNATURE<br>Signature, typed or printed name of registres<br>2. OFFICE   | d way and title papplicable. (NC<br>S AND DIRECTORS  | 84     City       s authorized by the corporati       Florida Statutes       DTE: Registered Agent signature require       13.       1.1 TITLE   | FL         poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered in the statement of the appointment as registered in the appointm |                   |
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| LE Change Addition<br>ME CET ADDRESS   | CORAL GABLES FL 33146  | DELETE   | 84     City       stututes, the above-named corp<br>s authorized by the corporati<br>Florida Statutes.       DTE: Registered Agent signature require       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE  | FL         poration submits this statement for the purpose of changing its registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in c s - G G         ad when reinstating).         DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Change       Addit         Change       Addit         Change       Addit   | ion<br>ion        |
| 6.3 STREET ADDRESS   | CORAL GABLES FL 33146  | DELETE   | 84     City       statutes, the above-named corp<br>s authorized by the corporati<br>Florida Statutes.       The corporation of the corpora | FL         poration submits this statement for the purpose of changing its registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in s board of directors. I hereby accept the appointment as registered         in c s - G G         ad when reinstating).         DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Change       Addit         Change       Addit         Change       Addit   | ion<br>ion        |
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| Y-ST-ZP 64 CitY-ST-ZP<br>L I 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<br>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<br>officer or director of the corporation with the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in<br>Block 12 or Block 13 if changed, or of an aftechment with an address, with all other like empowered.  | CORAL GABLES FL 33146  | DELETE   | 84     City       tutes, the above-named corp<br>s authorized by the corporati<br>Florida Statutes:       DTE: Registered Agent signature require       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP       5.1 TITLE       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP       6.1 TITLE       6.2 NAME  | FL         poration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered         Image: Change in the constraint of the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered         Image: Change in the constraint of the purpose of changing its registered on stating).         DATE         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         Change in Addit   | ion<br>ion<br>ion |

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