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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **K28917** (8)

1. Corporation Name

PRINCIPAL TRADE AND INVESTMENTS, INC.

Principal Place of Business

% JOHN SULLIVAN
801 BRICKELL AVE. STE 1301
MIAMI FL 33131

Mailing Address

801 BRICKELL AVE
STE 1301
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **07/20/1988** 3a. Date of Last Report **04/29/1994**

4. FEI Number **65-0107728** 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

2. Principal Place of Business 2a. Mailing Address

21 **773 Woodcrest** 26 **773 Woodcrest**

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **Key Biscayne, FL** 27 **Key Biscayne, FL**

City & State City & State

23 **33149** 25 **USA** 28 **33149** 30 **USA**

Zip Country Zip Country

9. Name and Address of Current Registered Agent

SULLIVAN, JOHN
801 BRICKELL AVE
SUITE 1301
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name **Luis Chico**

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

83

84 City **Key Biscayne** 85 Zip Code **FL 33149**

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, typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DPST**

NAME **CHICO, LUIS**

STREET ADDRESS **801 BRICKELL AVE #1301**

CITY - ST - ZIP **MIAMI FL 33131**

TITLE **AS**

NAME **SULLIVAN, JOHN, S**

STREET ADDRESS **801 BRICKELL AVE #1301**

CITY - ST - ZIP **MIAMI FL 33131**

TITLE **AT**

NAME **RODRIGUEZ, GONZALO**

STREET ADDRESS **801 BRICKELL AVE #1301**

CITY - ST - ZIP **MIAMI FL 33131**

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 Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE **Resigned on 5/29/94** Change Addition

2.2 NAME **John S. Sullivan**

2.3 STREET ADDRESS **801 Brickell Ave., #1301**

2.4 CITY - ST - ZIP **Miami, Florida 33131**

3.1 TITLE **Resigned on 5/29/94** Change Addition

3.2 NAME **Gonzalo Rodriguez**

3.3 STREET ADDRESS **801 Brickell Ave., #1301**

3.4 CITY - ST - ZIP **Miami, Florida 33131**

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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 of this report, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OF SIGNING OFFICER OR DIRECTOR

Luis Chico, President

(Title)

(Name) (Date)

4/10/95 - (805) 361-9857