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FILED
May 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # K33144 (2)
1. Corporation Name
DAGER TRADE CORPORATION

Principal Place of Business Mailing Address
7038 NW 50TH STREET 7038 NW 50TH STREET
MIAMI FL 33166 MIAMI FL 33166
US US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
21 13900 SW 128 Street 26 Suite, Apt. #, etc.
22 Suite B3 27 Suite, Apt. #, etc.
23 Miami - Florida 28 City & State
24 33186 25 USA 29 Zip 30 Country
3. Date Incorporated or Qualified 09/15/1988
4. FEI Number 65-0077202 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
DAGER, FERNANDO JOSE 81 Name
545 W PARK DR 82 Street Address (P.O. Box Number is Not Acceptable)
SUITE 13 83
MIAMI FL 33172 84 City 85 Zip Code FL

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 title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PTD ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition
NAME DAGER, FERNANDO JOSE 1.2 NAME
STREET ADDRESS 13903 SW 91ST STREET 1.3 STREET ADDRESS
CITY-ST-ZIP MIAMI FL 1.4 CITY-ST-ZIP
TITLE SD ☒ DELETE 2.1 TITLE ☐ Change ☐ Addition
NAME DAGER, MERLENE 2.2 NAME
STREET ADDRESS 545 WEST PINE DRIVE., #13 2.3 STREET ADDRESS
CITY-ST-ZIP MIAMI FL 2.4 CITY-ST-ZIP
TITLE ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition
NAME 3.2 NAME
STREET ADDRESS 3.3 STREET ADDRESS
CITY-ST-ZIP 3.4 CITY-ST-ZIP
TITLE ☐ DELETE 4.1 TITLE ☐ Change ☐ Addition
NAME 4.2 NAME
STREET ADDRESS 4.3 STREET ADDRESS
CITY-ST-ZIP 4.4 CITY-ST-ZIP
TITLE ☐ DELETE 5.1 TITLE ☐ Change ☐ Addition
NAME 5.2 NAME
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CITY-ST-ZIP 5.4 CITY-ST-ZIP
TITLE ☐ DELETE 6.1 TITLE ☐ Change ☐ Addition
NAME 6.2 NAME
STREET ADDRESS 6.3 STREET ADDRESS
CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 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 4/23/98 315956ADZ

CR2E034 (10/97)