STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)K54466 RABORA TRADING INC. Principal Place of Business Mailing Address 8325 NW 53RD ST 8325 NW 53RD ST SUITE 201A SUITE 201A MIAMI FL 33166 DO NOT WRITE IN THIS SPACE **MIAMI FL 33166** us 3. Date Incorporated or Qualified 12/29/1988 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 0451 NU 59-1679128 Not Applicable Sulte, Apt. #, etc. \$8.75 Additional KÍ. 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing iami \Box Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible **B**USA Yes □ No Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **MARTIN TABOR & ASSOCIATES** 8325 NW 53RD ST 82 SUITE 201A 83 **MIAMI FL 33166** 11. Pursuant to the provisions of Sections 607.0502 and 607.1509. 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 Digital Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and a supply the obligation 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE TABOR, MARTIN A. NAME 1.2 NAME 7320 S.W. 146 TERR STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET AODRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME

> 6.3 STREET ADDRESS 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 accurage 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 trusted 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 infactment with an address.