FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **K96576** **(9)**

1. Corporation Name

D.P.I. / WORLD TRADE, INC.

Principal Place of Business	Mailing Address
DPI WORLD TRADE. INC 6925 N.W. 77TH AVE MIAMI FL 33166 US	DPI WORLD TRADE. INC P. O. BOX 661012 MIAMI SPRINGS FL 33166 US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **06/20/1989**

3a. Date of Last Report: **04/14/1995**

4. FEI Number: **59-2973448** ☐ 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. 199.042, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

VALDES, JUAN E.
4160 W 16 AVE
S-402
HIALEAH FL 33012

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, this 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 _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, LUIS		12 NAME	
STREET ADDRESS	2030 WESTWARD DR		13 STREET ADDRESS	
CITY-ST-ZIP	MIAMI SPRINGS FL		14 CITY-ST-ZIP	
TITLE	VT	☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	FUENTES, EDUARDO E.		22 NAME	
STREET ADDRESS	145 NW 125TH ST		23 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI FL		24 CITY-ST-ZIP	
TITLE	S	☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, RAMON		32 NAME	
STREET ADDRESS	2030 WESTWARD DR		33 STREET ADDRESS	
CITY-ST-ZIP	MIAMI SPGS FL		34 CITY-ST-ZIP	
TITLE	VPS	☒ DELETE	41 TITLE	☐ Change ☐ Addition
NAME	CARLOS, OTERO	NO MORE	42 NAME	
STREET ADDRESS	3518 LOWELL WAY		43 STREET ADDRESS	
CITY-ST-ZIP	SAN DIEGO CA		44 CITY-ST-ZIP	
TITLE		☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME			52 NAME	
STREET ADDRESS			53 STREET ADDRESS	
CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME			62 NAME	
STREET ADDRESS			63 STREET ADDRESS	
CITY-ST-ZIP			64 CITY-ST-ZIP	

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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)(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: Luis Rodriguez 4/9/96 (305) 885-8322

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone