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PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Sandra B. Morti

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K96576

(9)

Orporation Name

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

Jan 15 1998 8:00am Secretary of State



Zip Code

**FILED** 

Principal Place of Business Mailing Address DPI WORLD TRADE, INC. DPI WORLD TRADE, INC. 6925 N.W. 77TH AVE P. O. BOX 661012 MIAMI FL 33166 MIAMI SPRINGS FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/20/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2973448 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ΠNο 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VALDES, JUAN E. 4160 W 16 AVE Street Address (P.O. Box Number is Not Acceptable) S-402 HIALEAH FL 33012

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 signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TETLE Change RODRIGUEZ, LUIS NAME 1.2 NAME **CR2E034** 2030 WESTWARD DR STREET ADORESS 1.3 STREET ADDRESS MIAMI SPRINGS FL CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition FUENTES, EDUARDO E. NAME 2.2 NAME 145 NW 125TH ST STREET ADDRESS 2.3 STREET ADDRESS N-MIAMI FL CITY-ST-ZIF 2. 4 CITY-ST-ZIP DELETE \_\_\_ Addition TITLE 3.1 TITLE RODRIGUEZ, RAMON NAME 2030 WESTWARD DR STREET ADDRESS 3.3 STREET ADDRESS MIAMI SPGS FL CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change TITLE Addition 4.1 TITLE 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 STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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 corporated of 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, con an attachment with an address.

SIGNATURE:

TLUX PRODERIEUEZ

1/3/98 (301)885-8322