## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **L24252**

U.S. ELEVATOR TRADING COMPANY

Principal Place	of Business	Mailing Address					
9162 NW 148TH	4 ST	9162 N W 148TH ST					
MIAMI, FL 33018 MIAMI, FL							
US		MIAMI FL 33018			DO NOT WRITE IN THIS SPACE		
		US			3. Date Incorporated or Qualifed		
	, .				10/19/1989	•	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	Ar	plied For
21	• •	26			65-0151321	· No	ot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			·	\$8.75	Additional
22					_5. Certificate of Status Desired	Fee R	- beriupe
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23	-	28			Trust Fund Contribution		to Fees
Zip	Country	Zip	Country	· · · · · · · · · · · · · · · · · · ·	8. This corporation owes the current year		,
	· ·	· ·	¬ '		Personal Property Tax.	Yes	Z/No
24	25	<u></u>	וט	· <del></del>	10. Name and Address of New Register		
	9. Name and Address of Current	Registered Agent	81	Name	lu. Name and Address of Non Rogistor	JO FIGURE	
· GIT	IERREZ, HECTOR H.		"	14anie			
· - ·- ·			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
9162 NW 148TH ST							
i MIAN	/II FL 33018		83				İ
[	•		84	City		. 85 Zip	Code
<b>\</b>			04	City	F		
11. Pursuant	to the provisions of Sections 607.0502	and 607,1508, Florida Statutes	, the above	e-named corp	oration submits this statement for the purpose	of changing its	registered
l office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was auti	norized by	the corporation	on's board of directors. I hereby accept the ap	pointment as re	egistered
agent. La	m familiar with, and accept the obligation	ons of, Section 607.0505, Fioric	a Statutes	<b>.</b>			
SIGNATURE		ANOTE: D			d when relastating) DATE		
40	Signature, typed or printed name of registered agent OFFICERS AND		13.	ni signature require	ADDITIONS/CHANGES TO OFFICERS		ORS IN 12
12.	P\$	DELETE	1.1 TITLE		ADDITIONS/CITATOLS TO OTT TOLIKE	☐ Change	Addition
TITLE		□ pere ie					
NAME	GUTIERREZ, HECTOR H.		1.2 NAME	l			
STREET ADDRESS	9162 NW 148TH ST		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	SERRANO, R. JULIAN		2.2 NAME				
STREET ADDRESS	9162 NW 148TH ST		2.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL	ger and the second	2.4 CITY-5		the second of the second second		. <u>.</u>
TITLE	ING WILL L	☐ DELETE	3.1 TITLE	J 1 - 4-11		☐ Change	☐ Addition
	l .		3.2 NAME			_ ,	_
NAME	·		1				
STREET ADDRESS	i	•	1	TADDRESS			
CITY-ST-ZIP	·		3.4. CITY-5	ST-ZIP			
ΠΤLE	· .	☐ DELETÉ	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS	• _		4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP			
TITLE		DELETE	51 DD F			☐ Change	☐ Addition

I hereby certify that the information supplied with this tiling 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 supplementar 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 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 that my name appears with all other like empowered.

5.2 NAME

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADORESS

STREET ADDRESS

C/TY-ST-ZIP

CITY-ST-ZIP

☐ DELETE

Addition

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90098 004 \*\*\*150.00