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

FILED PROFIT Jun 11 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0) FALCON TRADING UNLIMITED, INC. Principal Place of Business Mailing Address 7370 NW 36 STREET 7370 NW 36 STREET SUITE 3258 MIAMI FL 33168 **SUITE 325B** DO NOT WRITE IN THIS SPACE MIAMI FL 33166 3. Date Incorporated or Qualified 12/08/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0158549 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes ☐ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name JACKSON, DANIEL M 15131 NW 6 COURT 82 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33028 83 84 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registrated agent and title if applicable DATE 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE JACKSON, DANIEL M NAME 12 NAME 15131 NW 6 CT. STREET ADDRESS 1.3 STREET ADDRESS **PEMBROKE PINES FL 33028** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 21 TITLE NAME **Me**dina, Javier G AVE BOLIVAR PRIMER PISO4 STREET ADDRESS 23 STREET ADDRESS **PUNTO FIJO, VENEZULA** 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE MEDINA, ADOLFO G NAME 32 NAME **AVE BOLIVAR PRIMER PISO4** STREET ADDRESS 3.3 STREET ADDRESS PUNTO FIJO, VENEZULA CITY-ST-ZIP 3 4. City-St-ZiP DELETE Change noilibhA TITLE 4.1 TITLE MEDINA, ERNESTO J NAME 4. 2 NAME **AVE BOLIVAR PRIMER PISO4** STREET ADDRESS 4.3 STREET ADDRESS **PUNTO FIJO, VENEZULA** CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 THE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETÉ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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14. Thereby 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

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Block 12 or Block 13 if changed, or on an attachment with an address

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