

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 # L77979

1. Corporation Name
CENTURION TRADING, INC.

Principal Place of Business

2490 CORAL WAY
5TH FLOOR, SUITE 501
MIAMI FL 33145
US

Mailing Address

2490 CORAL WAY
5TH FLOOR, SUITE 501
MIAMI FL 33145
US

2. Principal Place of Business

21 2750 CORAL WAY

Suite, Apt. #, etc.

22 SUITE 201

City & State

23 MIAMI, FLORIDA

Zip

24 33145

Country

25 USA

2a. Mailing Address

26 2750 CORAL WAY

Suite, Apt. #, etc.

27 SUITE 201

City & State

28 MIAMI, FLORIDA

Zip

29 33145

Country

30 USA

9. Name and Address of Current Registered Agent

BENITEZ, DANIEL
2490 CORAL WAY, 5TH FLOOR
SUITE 501
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/04/1990

4. FEI Number

65-0201274

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 owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

81 Name

BENITEZ, DANIEL

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

2750 CORAL WAY

83

SUITE 201

84 City

MIAMI

FL

85 Zip Code

33145

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)

4/5/99

DATE

12.

OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME BENITEZ, DANIEL
STREET ADDRESS 2858 NW 79TH AVENUE
CITY-ST-ZIP MIAMI, FL 33129

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

PRESIDENT

☒ Change

☐ Addition

1.2 NAME

BENITEZ, DANIEL

1.3 STREET ADDRESS

2750 CORAL WAY, SUITE 201

1.4 CITY-ST-ZIP

MIAMI, FL. 33145

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/99

(305) 443-9929

Date

Daytime Phone #

CR2E034 (1/198)