

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 # L94487

1. Corporation Name
NORTUS TRADING CORPORATION

Principal Place of Business

8611 NW 66TH STREET
MIAMI FL 33166
US

Mailing Address

8611 NW 66 STREET
MIAMI FL 33166
US

2. Principal Place of Business

21 8348 NW 66th St
Suite, Apt. #, etc.

2a. Mailing Address

26 8348 NW 66th St
Suite, Apt. #, etc.

City & State

23 Miami, FL

City & State

28 Miami, FL

Zip Country

24 33166 25

Zip Country

29 33166 30

9. Name and Address of Current Registered Agent

PEDROSA, RICHELIEU JR.
8611 NW 66 STREET
MIAMI FL 33166

3. Date Incorporated or Qualified

08/17/1990

4. FEI Number

65-0222321

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

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

83 8348 NW 66th St

84 City Miami

FL

85 Zip Code

33166

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)

DATE

4/29/99

12.

OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME SD PEDROSA, RICHELIEU JR.

STREET ADDRESS 8541 NW 66 ST.

CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME PVS PEDROSA, RICHELIEU JR.

STREET ADDRESS 8541 NW 66 ST.

CITY-ST-ZIP MIAMI FL 33156

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

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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

Date

Daytime Phone #

4/29/99

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90052 033 ***150.00



DO NOT WRITE IN THIS SPACE

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