**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jan 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name M52553 MADERERA TROPICAL LUMBER AND TRADING CORPORATION Principal Place of Business Mailino Address 3326 MARY STREET. SUITE #302 3326 MARY STREET, SUITE #302 **MIAMI FL 33133** MIAMI FL 33133 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>05/21/1987</u> 2a, Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 26 59-2832949 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζıp Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. 29 25 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JORDAN, ENRIQUE A. 14665 OLD CUTLER ROAD 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33158 83 84 City Zip Code 85 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. \_\_ DELETE Change TITLE 1.1 TITLE JORDAN, ENRIQUE A. NAME 1.2 NAME 14665 OLD CUTLER ROAD STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP

Addition

Addition

Addition

Addition

Addition

Change

Change

CITY-ST-ZIP 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), indicated on this annual leport is suppliemental annual report is true and accurate and that my signature shall have the same officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapte 607, Block 12 or Block 13 if changed, on an attrichment with an address orida Statutes. I further certify that the information legal effect as if made under oath; that I am an Forida Statutes; and that my name appears in

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

444-406X

DELETE

DELETE

TITLE

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS