

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000098742

1. Entity Name
**INTERNATIONAL STRUCTURED TRADES
INCORPORATED**



Principal Place of Business

**C/O RICARDO J. SOUTO, ESQ.
201 S. BISCAYNE BLVD., STE. 1500
MIAMI, FL 33131**

Mailing Address

**C/O RICARDO J. SOUTO, ESQ.
201 S. BISCAYNE BLVD., STE. 1500
MIAMI, FL 33131**



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1157556

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION COMPANY OF MIAMI
1600 MIAMI CENTER, SUITE 1500 (R/S)
201 S. BISCAYNE BLVD.
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000475656
04/05/06-80025-005 158.75**

10. OFFICERS AND DIRECTORS

TITLE DT
NAME PEREZ, JOSE VELASCO
STREET ADDRESS 201 S. BISCAYNE BLVD., STE. 1500 (R/S)
CITY-ST-ZIP MIAMI, FL 33131

TITLE DS
NAME PIEDRAS, JUAN ANTONIO
STREET ADDRESS 201 S. BISCAYNE BLVD., STE 1500 (R/S)
CITY-ST-ZIP MIAMI, FL 33131

TITLE DP
NAME MEMBRENO, BENJAMIN T
STREET ADDRESS 201 S. BISCAYNE BLVD., STE 1500 (R/S)
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 a shareholder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attached list of an address, with all other like empowered.

SIGNATURE: **JOSE VELASCO PEREZ**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-01-2006 (34)609201657