2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P02000022318

1. Entity Name
R.V. TRADE CORPORATION

Principal Place of Business	Mailing Address
9745 MILLER DR MIAMI, FL 33165	9745 MILLER DR MIAMI, FL 33165

01272005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3612308
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MACEDO, CARLOS
9745 MILLER DR
MIAMI, FL 33165

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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 _____ CARLOS MACEDO 1/28/05
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, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUBIO, PABLO RUBEN
STREET ADDRESS	815 V. SARMIENTO
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA,
TITLE	D
NAME	AMILCAR-VILCHEZ, GUSTAVO
STREET ADDRESS	AV. GASPAR CAMPOS 1453 B VISTA,
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA,
TITLE	D
NAME	ANTONIO RUBIO, RUBEN JOSE
STREET ADDRESS	PALMAR 7006
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 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 the receiver 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 attachment with an address, with all other like empowered.

SIGNATURE: _____ Carlos Macedo, Acct. 1/27/05 (305) 412-0829
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #