2006 FOR PROFIT CORPORATION ANNUAL REPORT

May 03, 2006 8:00 am Secretary of State 05-03-2006 90216 009 ***158.75 DOCUMENT # P02000029855 J & M COTECSA TRADING, INC. 40081400 Principal Place of Business Mailing Address 2440 E. COMMERCIAL BLVD., STE 3 2440 E. COMMERCIAL BLVD., STE 3 FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04282006 Chg-P CR2E034 (11/05) City & State City & State 4. FEI Number Applied For 01-0635526 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LLANOS, VICTOR Street Address (P.O. Box Number is Not Acceptable) 9335 NW 45TH STREET FORT LAUDERDALE, FL 33351 8060 FAIRVLEW 202 DRIVE thinks 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 8. The above named entity: LLANOS SIGNATURE (NOTE Registered Agent signature regu 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. **PVTS** TITLE ☐ Delete LLANOS, VICTOR NAME NAME 8060 FAIRVIEW DEIVE APT. 202 STREET ADDRESS 2440 E. COMMERCIAL BLVD., STE 3 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33308 CITY-ST-ZIP TAHARAC, FL 33321 TITLE ☐ Delete TITLE AZUCENA F. DE MARIA HAN DE IIANOS HAME NAME STREET ADDRESS STREET ADDRESS 8060 FAIR VIEW DRIVE APT. 202 CITY-ST-7IP TAMARAC, FL 33321 CITY-ST-ZIP SD Addition ☐ Defete TITLE ☐ Change TULE JOSE M. LLANOS HAN 8060 FAIRVIEW DRIVE APT. 202 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAHARAC, FL 33321 ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete Change TITLE ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-/IP ☐ Delete ☐ Change Addition TITLE TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or appliemental report is true and accuracy 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 feceiver 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 auto-position of the corporation of the

VICTOR LIANOS

SIGNATURE

FILED