FILED
Mar 17, 2003 8:00 am
Secretary of State

03-04-2003 90152 001 *****8.75
03-04-2003 90152 002 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000052692

1. Entity Name
BESA TRADE INTERNATIONAL, CORP.

Principal Place of Business
P.O.BOX 1316
HALLANDALE, FL 33008

Mailing Address
P.O.BOX 1316
HALLANDALE, FL 33008

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business: 5307 SW 125th Ave.
Suite, Apt. #, etc.
City & State: Miramar, Florida
Zip: 33027 Country: USA

3. Mailing Address: 5307 SW 125th Ave.
Suite, Apt. #, etc.
City & State: Miramar, Florida
Zip: 33027 Country: USA

4. FEI Number: 74-3044406 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
JACQUES, MICHEL F
1825 S OCEAN DR 608
HALLANDALE, FL 33009

7. Name and Address of New Registered Agent
Name: Senada Taipi
Street Address (P.O. Box Number is Not Acceptable): 5307 SW 125th Avenue
City: Miramar FL Zip Code: 33027

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] 02/22/2003
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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	President	☐ Delete
NAME	Senada N. Taipi	
STREET ADDRESS	5307 SW 125th Ave.	
CITY-ST-ZIP	Miramar, FL. 33027	
TITLE	Vice President	☐ Delete
NAME	Michel François Jacques	
STREET ADDRESS	1825 S. Ocean Drive	
CITY-ST-ZIP	Hallandale Beach, FL 33009	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
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TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

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: [signature] 02/22/2003 7862905765
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #