

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90228 033 ***150.00

DOCUMENT # P03000032947

1. Entity Name
SONIN TRADING IMPORT AND EXPORT CORP.



Principal Place of Business
**810 EAST 7TH AVENUE
HIALEAH, FL**

Mailing Address
**810 EAST 7TH AVENUE
HIALEAH, FL**

94060910



2. Principal Place of Business
6860 Harding Ave

3. Mailing Address
6860 Harding Ave

04202004 Chg-P CR2E034 (10/03)

Suite, Apt. #, etc.
#2

Suite, Apt. #, etc.
#2

City & State
Miami Beach, Florida

City & State
Miami Beach, Florida

4. FEI Number
20-0479506

Applied For
Not Applicable

Zip Country
33141 USA

Zip Country
33141 USA

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

6. Name and Address of Current Registered Agent

**MENENDEZ, MARIA L
810 EAST 7TH AVENUE
HIALEAH, FL**

7. Name and Address of New Registered Agent

Name **Alexis Artman**

Street Address (P.O. Box Number is Not Acceptable)

6860 Harding Ave #2

City **Miami Beach**

FL

Zip Code
33141

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

SIGNATURE **ALEXIS ARTMAN**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

04-21-04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete
NAME **BERENSTEIN, URIEL**
STREET ADDRESS **THAMES 1326**
CITY-ST-ZIP **C1414DCZ-BUENOS ARIES, ARGEN.**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VPSD** ☒ Change ☐ Addition
NAME **Berenstein, Uriel**
STREET ADDRESS **Thames 1326**
CITY-ST-ZIP **C1414DCZ-Buenos Aries, Argentina**

TITLE **PD** ☐ Change ☒ Addition
NAME **Artman, Alexis**
STREET ADDRESS **6860 Harding Avenue #2**
CITY-ST-ZIP **Miami Beach, FL 33141**

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

TITLE ☐ Change ☐ Addition
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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: **ALEXIS ARTMAN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-21-04

Date

305-785-3649

Daytime Phone #