

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90415 030 \*\*\*150.00

**DOCUMENT # P03000052621**

**1. Entity Name**  
IGUAZU-BRAZIL TRADING GROUP INC.



**Principal Place of Business**  
2900 WEST 12TH AVE. SUITE 26  
HIALEAH, FL 33012

**Mailing Address**  
2900 WEST 12TH AVE. SUITE 26  
HIALEAH, FL 33012

**2. Principal Place of Business**

**3. Mailing Address**  
C/O Lopez Accounting  
Suite, Apt. #, etc.  
1800 W. 49 ST. #201



01082004 Chg-P CR2E034 (10/03)

**City & State**

**City & State**  
Hialeah, FL

**4. FEI Number**  
86-1062857

☐ Applied For  
☐ Not Applicable

**Zip** **Country**

**Zip** **Country**  
33012 USA

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

**6. Name and Address of Current Registered Agent**

MONTERO, EURIPIDES  
2900 WEST 12TH AVE. #26  
HIALEAH, FL 33012

**7. Name and Address of New Registered Agent**

**Name**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**City** **FL** **Zip Code**

**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** *Euripides Montero* **DATE** 5/7/2004  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering.)

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

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

**10. OFFICERS AND DIRECTORS**

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP**  
PD  
MONTERO, AMARILYS G  
8955 NW 148TH ST  
HIALEAH, FL 33018 ☐ Delete

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP**  
VPD  
MONTERO, EURIPIDES  
8955 NW 148TH ST  
HIALEAH, FL 33018 ☐ Delete

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP** ☐ Delete

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP** ☐ Delete

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP** ☐ Delete

**TITLE** **NAME** **STREET ADDRESS** **CITY - ST - ZIP** ☐ Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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

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

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

**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:** *Euripides Montero* **DATE** 5/7/04 (305) 825-3537  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR