

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90026 010 ***150.00

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01072006 Chg-P CR2E034 (11/05)

DOCUMENT # P05000032552 1. Entity Name N.P. INTERNATIONAL TRADES, INC.																																																																																					
Principal Place of Business 20811 NW 3RD COURT PEMBROKE PINES, FL 33029			Mailing Address 20811 NW 3RD COURT PEMBROKE PINES, FL 33029																																																																																		
2. Principal Place of Business		3. Mailing Address																																																																																			
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																			
City & State		City & State																																																																																			
Zip	Country	Zip	Country	4. FEI Number 20-2436423																																																																																	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable																																																																																	
6. Name and Address of Current Registered Agent PEREZ, JUAN C 20811 NW 3RD COURT PEMBROKE PINES, FL 33029				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: <i>Juan Carlos Perez</i> 2/11/06 <small>Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																			
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">P PEREZ, JUAN C <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>20811 NW 3RD COURT</td> </tr> <tr> <td>STREET ADDRESS</td> <td>PEMBROKE PINES, FL 33029</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>V NUNEZ, REYNALDO <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>20811 NW 3RD COURT</td> </tr> <tr> <td>STREET ADDRESS</td> <td>PEMBROKE PINES, FL 33029</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S NUNEZ, EVELYN <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>20811 NW 3RD COURT</td> </tr> <tr> <td>STREET ADDRESS</td> <td>PEMBROKE PINES, FL 33029</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T NUNEZ, GLORIA <input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>20811 NW 3RD COURT</td> </tr> <tr> <td>STREET ADDRESS</td> <td>PEMBROKE PINES, FL 33029</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table> </div> </div>						TITLE	P PEREZ, JUAN C <input type="checkbox"/> Delete	NAME	20811 NW 3RD COURT	STREET ADDRESS	PEMBROKE PINES, FL 33029	CITY-ST-ZIP		TITLE	V NUNEZ, REYNALDO <input type="checkbox"/> Delete	NAME	20811 NW 3RD COURT	STREET ADDRESS	PEMBROKE PINES, FL 33029	CITY-ST-ZIP		TITLE	S NUNEZ, EVELYN <input type="checkbox"/> Delete	NAME	20811 NW 3RD COURT	STREET ADDRESS	PEMBROKE PINES, FL 33029	CITY-ST-ZIP		TITLE	T NUNEZ, GLORIA <input type="checkbox"/> Delete	NAME	20811 NW 3RD COURT	STREET ADDRESS	PEMBROKE PINES, FL 33029	CITY-ST-ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	<input type="checkbox"/> Delete	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	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 exemptions contained in Chapter 119, 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: <i>Juan Carlos Perez</i> 2/11/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																					