FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P92000008610 (7) DOCUMENT #

GIORGIO'S TRADE CORP.

Principal Place of Business Mailing Address 5580 NW 84 AVE 5580 NW 84 AVE **MIAMI FL 33166** MIAM! FL 33166 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/02/1992 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0344548 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the currept year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SKRLD INC 201 ALHAMBRA CIR 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1102** 83 CORAL GABLES FL 33134 R4 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. __ DELETE Change Addition TITLE 1.1 TITLE ANTONIAZZI, GIORGIO NAME 1.2 NAME 10110 NW 56TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DVP DELETE Change Addition TITLE 2.1 TITLE ANTONIAZZI, NEYBIS NAME 2.2 NAME 10110 NW 56TH ST STREET ADDRESS 23 STREET ADDRESS MIAMI FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ Addition DELETE Change TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME

6.4 CITY - ST - 2IP CITY-ST-ZIP 14. 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 annual report or supplied annual 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 flustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME

Neybis V. Antoniazzi SIGNATURE:

DELETE

FILED

Feb 05 1998 8:00am

Secretary of State

Addition