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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000013640 (7)

Q-TRADE INTERNATIONAL CORP.

Principal Place of Business Mailing Address

FILED Apr 16 1998 8:00am Secretary of State

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1401 W FLAGI SUITE 207 MIAMI FL 331:		444 BRICKELL AVE STE 51-356 MIAMI FL 33131			DO NOT WRITE IN TH 3. Date Incorporated or Qualified 12/22/1992	IIS SPACE
2. Principal Pi	ace of Business	2a, Mailing Address			4. FEI Number	Applied For
21		26			65-0375844	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	<u>-</u>		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	<i>,</i>	8. This corporation owes or has paid the	current year Intangible Yes No
24	25] g. Name and Address of Curre	29	30		Personal Property Tax due June 30. 10. Name and Address of New Register	T
	- X	ent Hegistered Agent	81	Name	10. Name and Address of New Negleton	en vitem
	/ENTOS, JOAQUIN					
	1 W FLAGLER ST TE 207		82		ress (P.O. Box Number is Not Acceptable)	
MIA	MI FL 33135		83			
			84	'		85 Zip Code
office or re agent. I as	egistered agent, or both, in the Sta in familiar with, and accept the obli- Signature, typed or printed name of registered in	te of Florida. Such change wi igations of, Section 607.0505,	as authorized b Florida Statute	y the corpora s.	poration submits this statement for the purpos tion's board of directors. I hereby accept the ired when reinstaing)	appointment as registered
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSD	DELETE	1.1 TITLE			Change Addition
NAME	RAVENTOS, JOAQUIN		1.2 NAME			
STREET ADDRESS	1401 W FLAGLER ST SUIT	E 207	1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-	ST-ZIP		
TITLE	VTD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	ALAIX, MARIA P.		2.2 NAME			
STREET ADDRESS	1401 W FLAGLER ST, STE	207		TADDRESS		
CITY-ST-ZIP	MIAMI FL	T of the	2. 4 CITY	ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE			Change L. Abdition
NAME			3.2 NAME	*		
STREET ADDRESS			B	T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- 4.1 TITLE	SI-ZIP		Change Addition
NAME			4. 2 NAMI			
STREET ADDRESS				T ADDRESS		
1			4.4 CITY-			
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE	31- ZIF		Change Addition
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
i I			5.4 CITY -	·		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	01- ENF		Change Addition
NAME		بالمادين في	6.2 NAME			
STREET ADDRESS				T ADDRESS		
SIREEI ADURESS			6.4 CTV.	1		

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 supplemental 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 trustee 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.

SIGNATURE: ILL

HADID D BLATY

4/13/90