

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

AMENDED PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027404
1. Corporation Name

NEW WORLD TRADING GROUP, INC.

Principal Place of Business Mailing Address
4980 S.W. 52nd St. 4980 S.W. 52nd St.
#118 #118
Davie, FL 33314 Davie, FL 33314

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

LEOPOLD, KAREN S.
20801 Biscayne Boulevard
Suite 501
North Miami Beach, FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/93

4. FEI Number Applied For
65-0401246 Not Applicable

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

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

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name JOBLOVE, MICHAEL D.
82 Street Address (P.O. Box Number is Not Acceptable)
Suite 3300
83 100 S.E. 2nd Street
84 City Miami FL 85 Zip Code 33131

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 MICHAEL D. JOBLOVE June 11, 1999
(Signature, typed or printed name of registered agent, and date if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE PD
NAME KANT, JON
STREET ADDRESS 12555 Biscayne Blvd, No. 462
CITY-ST-ZIP N. Miami, FL 33181

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE PD
12 NAME SILVA, F. LUIS
13 STREET ADDRESS 2845 W. Aviary Drive
14 CITY-ST-ZIP Cooper City, FL 33026

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SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/99 954-447-4641
Date Date Time Phone #

CR2E034 (11/98)