2004 FOR PROFIT CORPORATION

Fab 04 2004 8:00 am

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DOCUMENT # P93000030234 1. Entity Name					Secretary of State 02-04-2004 90090 022 ***150.00		
OCEAN TRADE INTERNATIONAL, INC.					02 01 200 1 900 90 022 1 1 30.00		
Principal Plac	e of Business	Mailing Address					
9600 NW 25TH STREET		9600 NW 25TH STREET					
SUITE #7C MIAMI FL 33172		SUITE #7C MIAMI FL 33172					
US		US			L TERMERA ME LEGER TIM SOM ARM TEM ARM SOME AND AND AND AUGUS ALEES WAN STATER IN 1801		
2. Principal Place of Business 10517 SW 52 St		3. Mailing Address OX SYLIZES		65			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			MOORE CR2E034 (11/03)		
City & State		City,& State			4. FEI Number 65-0414265 Applied For		
Zip _	Country	Zip -	Country O		\$9.75 Additional	bie	
33	185 USA	33194	434	_	Fee Required		
	6. Name and Address of Current F	Registered Agent	Name		7. Name and Address of New Registered Agent	-	
BLANCO, ANA							
3766 SW 133RD PLACE (657) SW SD Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33175							
IATH	M1	A PC					
	, , ,	33185	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	Signature, typed or printed name of registered agent a	R)C) nd title if applicable. (NOTE:	Registered Agent signatu	re required v	When (ginstating) DATE		
	ILE NOW!!! FEE IS \$150.00						
Afte	r May 1, 2004 Fee will be \$550.00 k Payable to Florida Department of	State			9. Election Campaign Financing \$5.00 May B Trust Fund Contribution.		
10.	' OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P ANCO LANDE	☐ Delete	TITLÉ		Change Addi	ition	
NAME STREET ADDRESS	BLANCO, JAMIE 3766 SW 133 PL		NAME STREET ADDRESS	2مهار	17 SW 52 ST		
CITY-ST-ZIP	MIAMI FL 33175		CITY-ST-ZIP	MIL	Ami, F 33185		
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NAME	BLANCO, ANA M		NAME	8	10 2W 52 25		
CITY-ST-ZIP	3766 SW 133 PL MIAMI FL 33175		STREET ADDRESS CITY-ST-ZIP		2/ 27/25		
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	certify that the information supplied with	this filing does not qualify for t	the exemption stat	ed in Sec	ection 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: