FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 0:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000042736 (7)**

1. Corporation Name

PIRAMIDE INTERNATIONAL TRADING INC.

Principal Place of Business	Mailing Address
3300 N.E. 191 ST. #211 AVENTURA FL 33180 US	3300 N.E. 191 ST. #211 AVENTURA FL 33180 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/07/1993**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business	2a. Mailing Address
21 **422 Stonemont Dr**	26 **422 Stonemont Dr**
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 **Fort Lauderdale Florida**	City & State 28 **Fort Lauderdale FL**
Zip 24 **33326** Country 25 **USA**	Zip 29 **33326** Country 30 **USA**

4. FEI Number: **65-0413725** ☐ Applied For ☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

TORPOCO, RAUL V
3300 N.E. 191ST STREET
SUITE 311
AVENTURA FL 33180

10. Name and Address of New Registered Agent

81 Name: **TORPOCO, RAUL V**
82 Street Address (P.O. Box Number is Not Acceptable): **697 Lake Blvd.**
83
84 City: **Fort Lauderdale** **FL** 85 Zip Code: **33326**

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
01 Title 02 Name 03 Street Address 04 City, St, Zip	PD TORPOCO, RAUL V. 3300 N.E. 191 STREET #211 AVENTURA FL	01 Title 02 Name 03 Street Address 04 City, St, Zip	☒ Change ☐ Addition PD TORPOCO, RAUL V 697 Lake Blvd. Fort Laud. FL 33326
05 Title 06 Name 07 Street Address 08 City, St, Zip		05 Title 06 Name 07 Street Address 08 City, St, Zip	☐ Change ☐ Addition
09 Title 10 Name 11 Street Address 12 City, St, Zip		09 Title 10 Name 11 Street Address 12 City, St, Zip	☐ Change ☒ Addition TSD SALAZAR, GONZALO R 422 Stonemont Dr Fort Lauderdale FL 33326
13 Title 14 Name 15 Street Address 16 City, St, Zip		13 Title 14 Name 15 Street Address 16 City, St, Zip	☐ Change ☐ Addition
17 Title 18 Name 19 Street Address 20 City, St, Zip		17 Title 18 Name 19 Street Address 20 City, St, Zip	☐ Change ☐ Addition
21 Title 22 Name 23 Street Address 24 City, St, Zip		21 Title 22 Name 23 Street Address 24 City, St, Zip	☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this filing complies with applicable law and that, to the best of my knowledge, 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: **PD RAUL V TORPOCO** **1/19/95 (305)389-5596**

SIGNATURE AND TITLE OF CHAIRMAN, PRESIDENT OR OTHER OFFICER OR DIRECTOR

0197071 CP