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 # P93000044484 (2)

RAMPI METALS TRADING, INC.

Principal Place of Business

11200 S.W. 4TH ST

Mailing Address

11200 S.W. 4TH ST.

FILED Mar 06 1998 8:00am Secretary of State



PEMBROKE PINES FL 33025				PEMBROKE PINES FL 33025							DO NOT WRI	TE IN TUIC	DACE	:		
										3.	Date Incorporate			JI ACL		
										"	06/23/1993					
2. Principal Place of Business				2a. Mailing Address					4. FEI Number					Applied For		
21				26					65-0418630					Not Applicable		
Suite, Apt. #, etc.				Suite, Ap1. #, etc.										\$8.75 Additional Fee Required		
City & State				City & State					6.	Election Campai	gn Financing		\$5	5.00	May Be	
23				28						<u> </u>	Trust Fund Cont	ribution		A	dded	o Fees
Zip	Country			 			Country	y		8. This corporation owes or has paid the current year Inti						'
24		5		29	A	30				<u> </u>	Personal Propert			Yes	<u></u>	No
0414		nd Address of	Current H	agistered	Agent		81	T-,	Name	10.	Name and Add	ATR OL MAM	negistered :	Agent		
PIMENTEL, RAMON								Ľ								
11200 S.W. 4TH ST. PEMBROKE PINES FL 33025									Street Addre	et Address (P.O. Box Number is Not Acceptable)						
FEN	MONUNE FI	1E9 LF 990%	,				83	1-								
							Ľ									
							84	(City				FL	85	Zip (Code
11 Pursuant to	o the provisio	ne of Sections 6	307 0502 an	od 607 150	na Florida 9	Statutos t	he show		amed corp	oratio	n submits this sta	tement for the		chanc	ina it	e registered
office or re agent I an	egistered age in familiar with	nt, or both, in the n, and accept the	ne State of F ne obligation	lorida. Suns of, Sect	ch change ion 607.050	was autho 05, Florida	orized b	y th s.	e corporati	ion's b	poard of directors	I hereby acc	ept the app	ointme	nt as	registered
SIGNATURE																
12.	Signature, typed or	printed name of regi	RS AND DI			(NOTE: Reg		ent s	signature require		n reinstating) ADDITIONS/CHAI	ICEO TO OF	DATE	DIDE	OTOD	0 151 40
TITLE	D	OFFICE	na ANU UI	nec long	DELET	F	13. 1.1 TITLE				RUDITIONS/CHAI	NGES TO OFF	TOERS AND	Ch		Addition
NAME	_	L, RAMON					1.2 NAME								ag.	7,000,000
STREET ADDRESS		W. 4TH ST.					1.3 STREE	r afv	vocce							
CITY-ST-ZIP		KE PINES FL	33025				1.4 CITY-5									
TITLE					☐ DELET	E	2.1 TITLE	31-4						☐ Ch	ange	Addition
NAME					_		2.2 NAME		ĺ						•	
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CITY-ST-ZIP							2. 4 CITY-									
TITLE					DELET	Ē	3.1 TITLE			-:				Ch	ange	Addition
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NAME	•	•					6.2 NAME		ĺ							
STREET ADDRESS							6.3 STREET	ADO	DRESS							
CITY-ST-ZIP							6.4 CITY - S									
14 I hereby co	edify that the	information sun	plied with th	sis filina d	one not our	alify for the	evemn	tion	stated in S	Section	n 119 07(3)(i) Flo	rine Statutes	I further co	tifu the	at the	information

indicated on this annual reporter 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 alignress.

2/21/20