

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

FILED

May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P93000048688 (4)

1. Corporation Name
EVER TRADING COMPANY



Principal Place of Business

Mailing Address

150 S.E. 2ND AVE.
SUITE 1107
MIAMI FL 33131

150 S.E. 2ND AVE.
SUITE 1107
MIAMI FL 33131-1578

2. Principal Place of Business

2a. Mailing Address

21 3045 N.W. 82nd Avenue
Suite, Apt. #, etc.

26 3045 NW. 82nd Avenue
Suite, Apt. #, etc.

22 City & State
23 MIAMI - FL

27 City & State
28 Miami - FL

24 Zip 33122
25 Country USA

29 Zip 33122
30 Country USA

3. Date Incorporated or Qualified
07/12/1993

3a. Date of Last Report
02/05/1996

4. FEI Number
65-0422590

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

10. Name and Address of New Registered Agent

BRAZ, MARIO M
801 SOUTH BAYSHORE DR., #1270
TOWER 4
MIAMI FL 33131

81 Name BRAZ, MARIO M.

82 Street Address (P.O. Box Number is Not Acceptable)
8855 COLLINS AVE. # 907 G

83

84 City SURFSIDE

FL

85 Zip Code 33154

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

Signature of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME BRAZ, MARIO M
STREET ADDRESS 801 SOUTH BAYSHORE DR., #1270 TOWER 4
CITY- ST- ZIP MIAMI FL 33131

1.1 TITLE P
1.2 NAME BRAZ, MARIO MONTEIRO
1.3 STREET ADDRESS 8855 COLLINS AVE. # 907 G
1.4 CITY- ST- ZIP SURFSIDE - FL - 33154

TITLE VP
NAME BRAZ, MARCOS T
STREET ADDRESS 801 S. BAYSHORE DR. #1270-TOWER 4
CITY- ST- ZIP MIAMI FL 33131

2.1 TITLE VP
2.2 NAME BRAZ, MARCOS T.
2.3 STREET ADDRESS 8855 COLLINS AVE # 907 G
2.4 CITY- ST- ZIP SURFSIDE - FL - 33154

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

3.1 TITLE S
3.2 NAME BRAZ, ALICET.
3.3 STREET ADDRESS 8855 COLLINS AVE. # 907 G.
3.4 CITY- ST- ZIP SURFSIDE - FL - 33154

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do 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:

Signature and typed or printed name of signing officer or director
ABREU, ANDREA

04/14/97 (305)372-2969

CR2E034 (9/96)