

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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000055236 (2)
 1. Corporation Name
G.B. INTERNATIONAL TRADING, INC.



Principal Place of Business 7867-NW 42TH ST MIAMI FL 33126 US	Mailing Address 7267 NW 12 ST MIAMI FL 33126 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/05/1993

2. Principal Place of Business 21 4851 N.W. 79 ave Suite, Apt. #, etc. 22 HC City & State 23 MIAMI FLA Zip Country 24 33166 25 DADE	2a. Mailing Address 26 4851 N.W. 79 ave Suite, Apt. #, etc. 27 HC City & State 28 MIAMI-FLA Zip Country 29 33166 30 DADE
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4. FEI Number
65-0428286 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

BELTRAN, RAFAEL
7267 NW 12 ST
MIAMI FL 33126

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

11. Pursuant to the provisions of Sections 607.0542 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	BELTRAN, RAFAEL	
STREET ADDRESS	7267 NW 12 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	BELTRAN, NAEMAR	
STREET ADDRESS	7267 NW 12 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BELTRAN, ABEMAR	
STREET ADDRESS	7267 NW 12 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	RONDON, TANIA	
STREET ADDRESS	7267 NW 12 ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	4851 N.W. 79 ave Suite 6
1.4 CITY-ST-ZIP	MIAMI FL 33166
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	4851 N.W. 79 ave Suite 6
2.4 CITY-ST-ZIP	MIAMI FL 33166
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	4851 N.W. 79 ave Suite 6
3.4 CITY-ST-ZIP	MIAMI FL 33166
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	4851 N.W. 79 ave Suite 6
4.4 CITY-ST-ZIP	MIAMI FL 33166
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 _____ DATE **05/11/98**

CR2E034 (10/97)