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FILED

Apr 25 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 # P93000057972 (0)

1. Corporation Name  
HIGH TECH TRADE, INC.

Principal Place of Business

Mailing Address

777 BRICKELL AVE.  
5TH FLOOR  
MIAMI FL 33131  
US

777 BRICKELL AVE.  
5TH FLOOR  
MIAMI FL 33131-2807  
US

3. Date Incorporated or Qualified  
08/18/1993

3a. Date of Last Report  
04/16/1996

4. FEI Number  
65-0436417

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CANTOR, STEVEN L  
777 BRICKELL AVE.  
5TH FLOOR  
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed 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 D ☐ DELETE  
NAME ALTVAER, ULRICH  
STREET ADDRESS 777 BRICKELL AVE. 5TH FLOOR  
CITY-ST-ZIP MIAMI FL

1.1 TITLE P/T/D ☒ Change ☐ Addition  
1.2 NAME ALTVAER ULRICH  
1.3 STREET ADDRESS 777 BRICKELL AVE. 5TH FLOOR  
1.4 CITY-ST-ZIP MIAMI, FL

TITLE D ☐ DELETE  
NAME SCHREIBER, BERND  
STREET ADDRESS 777 BRICKELL AVE. 5TH FLOOR  
CITY-ST-ZIP MIAMI FL

2.1 TITLE V/S/D ☒ Change ☐ Addition  
2.2 NAME SCHREIBER, BERND  
2.3 STREET ADDRESS 14848 OLD 41, UNIT 6  
2.4 CITY-ST-ZIP NAPLES, FL 34110

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
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

SCHREIBER, DIRECTOR

4/5/97

941 594 9775

Date

Daytime Phone #

CR2E034 (9/96)