04-23-1999 90185 041 ***150.00

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

PROFIT CORPORATION. ANNUAL REPORT

1999



DIVISION OF CORPORATIONS

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DOCUMENT # P93000058928

1. Corporation Name

ALLTRADING CO.

rincipal Place of	Business		

20141 N.W. 81ST COURT HIALEAH FL 33015-5925

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

20141 N.W. 81ST COURT HIALEAH FL 33015-5925

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Not Applicable

	DO NOT	WRITEIN	THISS	PACE
Date Incorpo	orated or Qu	alifed		

08/16/1993 4. FEI Number

65-0434040

5. Certifcate of Status Desired

6. Election Campaign Financing

23	-	28				Trust Fund Contribution		A	dded to	Fees
Zip	Country		Zip	Countr	у	8. This corporation owes the current y	ear Inta	angibl€		
24	25	29	;	30		Personal Property Tax.		☐ Ye		No
9. Name and Address of Current Registered Agent						10. Name and Address of New Regis	tered /	Agent		
	NEO ALEJANDEO		·	81	Name					
LLANES, ALEJANDRO		82	82 Street Address (P.O. Box Number is Not Acceptable)							
1	I1 N.W. 81ST COURT									
HIAL	EAH FL 33015-5925			83	3					
				84	City			85	Zip Co	ode
{				1			FL	, } }	•	
11. Pursuant	to the provisions of Sections 607	.0502 and 6	607.1508, Florida Statute	s, the abov	/e-named co	rporation submits this statement for the purp	ose of	chang	ing its r	egistered
office or r	egistered agent, or both, in the S m familiar with, and accept the ol	tate of Flori digations of	da. Such change was au f. Section 607.0505. Flori	tnorized by da Statute	/ tne corpora s.	tion's board of directors. I hereby accept the	appon	unen	as reg	istered
			,							
SIGNATURE	Signature, typed or printed name of registered	d agent and title	if applicable (NOTE: I	Registered Age	ent signature requ		ATE			
12.		AND DIRE		13.		ADDITIONS/CHANGES TO OFFICE	RS AN		_	
TITLE ,	P		☐ DELETE	1.1 TITLE	İ			Cr	ange	Addition
NAME .	LLANES, ALEJANDRO			1.2 NAME	ľ				•	
STREET ADDRESS	.20141 N.W. 81ST COURT			1.3 STREE	T ADDRESS					• .
CfTY-ST-ZI₽	HIALEAH FL 33015-5925			1.4 CITY-	ST-ZIP					
πιε	VP		☐ DELETE	2.1 TITLE	İ			다	ange	Addition
NAME	LLANES, ROSSANA			2.2 NAME						
STREET ADDRESS	20141 N.W. 81ST COURT			2.3 STREE	ET ADDRESS					
CITY-ST-ZIP	HIALEAH FL 33015-5925		·	2.4 CITY-	ST-ZIP		<u> </u>			
TITLE		-	☐ DELETE	3.1 TITLE				C	ange	☐ Addition
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	ET ADDRESS					
CITY-ST-ZIP				3.4. CITY-	ST-ZIP					
TITLE			☐ DELETE	4.1 TITLE				CI	hange	Addition
NAME				4. 2 NAME	:					
STREET ADDRESS				4.3 STREE	ET ADDRESS					
CITY-ST-ZIP				4.4 CITY-	ST-ZIP					
TITLE			☐ DELETE	5.1 TITLE					hange	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREI	ET ADDRESS					
CITY-ST-ZIP				5.4 CITY-	ST-ZIP					
TITLE			☐ DELETE	6.1 TITLE				C	nange	Addition
NAME				6.2 NAME						
				63 STRE	T ADDRESS					

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 with all other like empowered.

6.4 CITY-ST-ZIP

ALEJANDRO LLANES,

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SECTURED NG OFFICER OR DIRECTOR