

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000072487 (0)

1. Corporation Name

RACHIDI TRUSTY GLOBAL TRADING CORPORATION



Principal Place of Business

1717 N. BAYSHORE DR.
PENTHOUSE A-4245
MIAMI FL 33132

Mailing Address

1717 N. BAYSHORE DR.
PENTHOUSE A-4245
MIAMI FL 33132

2. Principal Place of Business

21 12000 BISCAYNE

Suite, Apt. #, etc.

22 309

City & State

23 MIAMI FLORIDA

24 33181

Country

2a. Mailing Address

26 12000 BISCAYNE

Suite, Apt. #, etc.

27 309

City & State

28 MIAMI FLORIDA

29 33181

Country

3. Date Incorporated or Qualified

10/19/1993

3a. Date of Last Report

08/11/1995

4. FET Number

59-3208399

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$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

X No

9. Name and Address of Current Registered Agent

AIDO-TRUSTY, DALE
3510 NE 167TH ST
N MIAMI BEACH FL 33160

10. Name and Address of New Registered Agent

81 Name

JAMES R. TOLZIER

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

RACHIDI TRUSTY GLOBAL TRADING

83

12000 BISCAYNE BLVD SUITE 309

84

MIAMI

FL

85

Zip Code
33181

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 making change)

3/1/96
(DATE)

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME AIDO-TRUSTY, DALE
STREET ADDRESS 3510 NE 167TH ST
CITY-ST-ZIP N. MIAMI BEACH FL

TITLE PRESIDENT/TREASURER ☐ DELETE
NAME JAMES R. TOLZIER
STREET ADDRESS 12000 BISCAYNE #309
CITY-ST-ZIP MIAMI, FL 33181

TITLE VICE PRESIDENT ☐ DELETE
NAME CARROLL S. KEIR
STREET ADDRESS 12000 BISCAYNE #309
CITY-ST-ZIP MIAMI FL 33181

TITLE SECRETARY ☐ DELETE
NAME ZBADAH RACHIDI
STREET ADDRESS 12000 BISCAYNE #309
CITY-ST-ZIP MIAMI, FL 33181

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, typed or printed name of signing officer or director)

3/1/96 (305) 895-1168
(DATE) (Daytime Phone #)

CR2E034 (12/95)