FILE NOW; FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000080999 (4)

1. Corporate Name
A. P. B. TRADING, INC.

Principal Office Address
150 SE 2ND AVE
SUITE 909
MIAMI FL 33131
US

Mailing Address
150 SE 2ND AVE
SUITE 909
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated/Qualified: 11/18/1993
3a. Date of Last Report: 04/26/1994

2. FEI Number (Applicable): 21
2a. Mailing Address: 26 150 SE. 2nd Ave.
4. FEI Number: 65-0451297 — Applied For / Not Applicable
Street Address: 22
Suite Apt # or Rm: 27 Suite 1313
5. Certificate of Status Desired: X — $8.75 Additional Fee Required
City: 23
City & State: 28 Miami, FL
6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees
24 25 29 33131 30 USA
8. [illegible] Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
PRATS, GABRIEL
151 MAJORCA AVENUE
CORAL GALBES FL 33134

10. Name and Address of New Registered Agent
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 Section 607.0501 of the 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 I agree to comply with the provisions of Section 607.0501 Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS
TITLE
NAME: SCD
DE MORAES BOURROUL, ANTONIO P
150 SE 2ND AVE, SUITE 909 X
MIAMI FL 33131

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS
TITLE
NAME: SCD
DE MORAES BOURROUL, ANTONIO P.
150 S.E. 2nd. Avenue, Suite 1313
Miami, FL 33131
☒ Change ☐ Addition

14. I hereby certify that the information supplied with this long or substantially formatted report does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I hereby certify that the information shown on the annual report or supplemental annual report is true and complete and that my signature shall have the same legal effect and force 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 in the proper capacity on the front of this form with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/01/95 (305) 371-7429
Date Daytime Phone

0127607 CP