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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **FILED** Mar 02, 1999 8:00 am Secretary of State 03-02-1999 90094 044 \*\*\*150.00

DOCUMENT #	P93000084345
1. Corporation Name	1 0000000 10 10

PASHALI	C TRADING CORPORATION	1						
Principal Place	of Business	Mailing Address					ile <b>Bibba</b> iriti A	filtaf alst laat
999 S. BAY SH	ORE OR.	999 S. BAY SHORE DR.						
#910 #910				DO MOT MOTE IN THE COACE				
MIAMI FL 33131				DO NOT WRITE IN THIS SPACE				
7		/			3. Date Incorporated or Qualifed			
		O- Mailing Address			12/03/1993 4. FEI Number		Anı	plied For
<del></del>	ace of Business	2a. Mailing Address 26 same as above			==	,	J <del>- )</del>	t Applicable
<u> </u>	ne as above	26 Same as	above		65-0470817		\$8.75 A	
Suite, Apt. #	#, etc.	<u>⊢</u> ¬			<ol><li>Certificate of Status Desired</li></ol>		Fee Rec	i
City & State		City & State			6. Election Campaign Financing		\$5.00	May Po
<del></del> , _		28			Trust Fund Contribution		Added to	
Zip	Country	Zip	Country		8. This corporation owes the curr	ent vear Intar		
24	25	29	30		Personal Property Tax.			□No
24	9. Name and Address of Curren		100,		10. Name and Address of New F	Registered A	gent	
NEN	L, GUILLERMO A		1 1	ame	JUAN SOLAN			
	S. BAYSHORE DR.		82 St		ss (P.O. Box Number is Not Accepta			
	E 910	,	83		99 Brickell Bay	Drive		
	H FL 33131	/		S	uite 910			
			<b>84</b> Ci	•	Miami	FL	85 Zip C	3131
11. Pursuant	to the provisions of Sections 607 050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Sta	tutes, the above-na	med corpor	ration submits this statement for the	purpose of cl	nanging its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change way tions of, Section 607.0505./	s authouzec by the Floridal Statutes.	corporation	S DOSIG OF GRECLOIS. THE EDY ACCE	or the appoint	/ Las rug	Jistored
SIGNATURE		- 1   1				01/14/	199	i
SIGNATURE	Signature, typed or printed name of registered ager	it and title if applicable.	Registered Agent sign	nature required v		BATE		
12.	OFFICERS AN	ID DIRECTORS	13		ADDITIONS/CHANGES TO OF			
TITLE	D	A DILETE	1.1 TITLE		res.		Change	Addition
NAME	DIEHL, GUILLERMO		12 NAME	- {	Juan A. Solano			{
STREET ADDRESS	C/O 999 S. BAYSHORE DRIVE,	, <b>#</b> 910 ~	1.3 STREET ADD	RESS	999 Brickell Ba		ve	
CITY-ST-ZIP	MIAMI FL 33131		1.4 CITY-ST-ZIP	·	<u>Miami, Fl. 3313</u>			- Addition
TITLE		☐ DELETE	2.1 TITLE				Change	☐ Addition
NAME			2.2 NAME	1				ł
STREET ADDRESS			2.3 STREET ADD	RESS				1
CITY-ST-ZIP			2.4 CITY-ST-ZIF	<u> </u>	<del>_</del>		·	
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			3.2 NAME					1
STREET ADDRESS			3.3 STREET ADD	RESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIF	P				
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME	-		4, 2 NAME	}				3
STREET ADDRESS			4.3 STREET ADD	RESS		·		
CITY-ST-ZIP			4.4 CITY-ST-ZIP	<u> </u>				
TITLE	l	☐ DELETE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADD	- 1				
CITY-ST-ZIP			5.4 CITY-ST-ZIP	·				
TITLE		☐ DELETE	-	ļ			☐ Change	Addition
NAME			6.2 NAME	j				ļ
STREET ADDRESS			6.3 STREET ADD	ORESS				ļ

14. I hereby certify that the information supplied with this filing does not quali indicated on this annual report or supplemental annual report is true and officer or director of the corporation or the receiver or trustee empowered Block 12 or Block 13 if changed, or on an extractment with an address, we have the corporation of the receiver or trustee. emption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am an his report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: