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PROFIT CORPORATION ANNUAL REPORT



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

1996

P9400003423 (8) DOCUMENT #

corporation marrie		
DUCK TRADING	CORRORATION	

DUCK TRADING CORPORATION Principal Place of Business Mailing Address 1121 CRANDON BLVD. 1121 CRANDON BLVD. **UNIT D-103** UNIT D-103 KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149 3. Date Incorporated or Qualified 3a. Date of Last Report 01/06/1994 01/24/1995 2. Principal Place of Business 2a. Mailing Address 4 FELNumber Applied For 21 65-0462440 26 Not Applicable Saite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm ID}$ Zio Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUNTER, KENNETH 82 Street Address (P.O. Box Number is Not Acceptable) 1865 BRICKELL AVE. #410 83 **MIAMI FL 33129** 84 85 Zip Code •11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flonda 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE at rectipe of or postest name of registerest a pertiand (tild it applicance (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Taller DELETE 1 1 TIELE Addition ☐ Chanoe ARANGO, ANA P NAMi 1.2 NAME 1121 CRANDON BLVD., #D-103 STREET ADDRESS 1.3 STREET ADDRESS **KEY BISCAYNE FL 33149** CIDY-ST-ZIE 1.4 CITY - ST - ZIP THUE DELETE 2 1 TITLE Change ☐ Addition ARANGO, JUAN D 2.2 NAME 1121 CRANDON BLVD., #D-103 STRUET ADDRESS. 23 STREET ADDRESS **KEY BISCAYNE FL 33149** OFY ST ZP 2 4 CITY - ST - ZIP DELETE Time 3 1 Tifle Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY - \$1 - ZiF TillE DELETE 4.1 TITLE Change ☐ Addition NAT 4.2 NAME STREET ADORESS 4 3 STREET ADDRESS CITY ST-ZIP 4.4 CITY - ST - ZIP 111; F DELETE 70000017<u>4</u>1507° Addition 5 1 TITLE NAME 52 NAME -03/13/96--01068--002 STREET ACCRESS 5 3 STREET ADDRESS ***200.00 CRY-ST-ZP 5.4 CiTy - ST-2IP Tilly DELFTE 6 1 TITLE ☐ Change ☐ Add-tion

14. I do hereby certify that the information supplied with this filling 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 find of sid on this fining 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 find of sid on this fining 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 find of sid on this filling 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 find of sid on this filling 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 find of sid on this filling 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 find of sid on this filling 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 find of sid on this filling 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 filling is voluntarily furnished and does not call that the information filling is voluntarily furnished and does not call that the information filling is voluntarily furnished and does not call that the information furnished in the information filling is voluntarily furnished and does not call that the information furnished in the information furnish

OF SIGNING OFFICER OR DIRECTOR

6.2 NAME

6.3 STREET ADDRESS

64 CITY - \$1-7IP

NAME

STREET ADDRESS

Cdn - ST Zir

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