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Jun 16 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94 000016875
 1. Corporation Name
Presto Trade Corporation

Principal Place of Business Mailing Address

2. Principal Place of Business 21 7850 NW 146 ST. Suite, Apt. #, etc 22 424 City & State 23 MIAMI LAKES, FL Zip Country 24 33016 25 U.S.A.		2a. Mailing Address 26 7850 NW 146 ST. Suite, Apt. #, etc 27 424 City & State 28 MIAMI LAKES, FL Zip Country 29 33016 30 U.S.A.		3. Date incorporated or Qualified 03/03/94 3a. Date of Last Report Applied For Not Applicable	4. FEI Number 65-0474116	5. Certificate of Status Desired ☐ \$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 ☐ No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 No. 424 84 City 85 Zip Code	
VICTOR CASTAGNOLA 7850 NW 146 ST MIAMI LAKES, FL 33016	

11. Pursuant to the provisions of Sections 607.0502 and 607.1208, 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 *Victor Castagnola* 6/6/97
Signature typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	☒ Change ☐ Add New
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	☐ Change ☐ Add New
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	☐ Change ☐ Add New
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	☐ Change ☐ Add New
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	☐ Change ☐ Add New
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Add New

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.001, Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature and the name of the corporation are correct. I am a director of the corporation and I am not a trustee, partner, or officer of the corporation. I am not a director of the corporation and I am not a trustee, partner, or officer of the corporation. I am not a director of the corporation and I am not a trustee, partner, or officer of the corporation. I am not a director of the corporation and I am not a trustee, partner, or officer of the corporation.

SIGNATURE: *Victor Castagnola* 6/6/97 (305) 8198009
 CS 6/16/97