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 11:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000024758 (2)**

1. Corporation Name

AMERIMEX TRADING SERVICES, CORP.

Principal Place of Business	Mailing Address
~~8022 N.W. 2ND ST.~~ ~~PLANTATION FL 33324~~	~~8022 N.W. 2ND ST.~~ ~~PLANTATION FL 33324~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/31/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 51 N.W. 115 AVE.	26 51 N.W. 115 AVE.
Suite, Apt. #, etc. 22 SUITE 104	Suite, Apt. #, etc. 27 SUITE 104
City & State 23 PLANTATION, FL	City & State 28 PLANTATION, FL
Zip: 24 33325 Country: 25 US	Zip: 29 33325 Country: 30 US

4. FEI Number: 65-0480333 ☐ Applied For ☐ Not Applicable

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 authority for intangible tax under § 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~ALVAREZ, ANGELA~~ ~~8022 N.W. 2ND ST.~~ ~~PLANTATION FL 33324~~	81 Name: ALVAREZ, ANGELA 82 Street Address (P.O. Box Number is Not Acceptable): 51 N.W. 115 AVENUE 83 SUITE 104 84 City: PLANTATION, FL 85 Zip Code: 33325

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: _____ (Typed or printed name of registered agent and title if agent is a corporation) (Registered Agent signature required when filed separately) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~D~~	11 TITLE	D ☒ Change ☐ Addition
NAME	~~FEBLES, IGNACIO D~~	12 NAME	FEBLES, IGNACIO D.
STREET ADDRESS	~~8022 N.W. 2ND CT.~~	13 STREET ADDRESS	51 N.W. 115 AVE. SUITE 104
CITY ST ZIP	~~PLANTATION FL 33324~~	14 CITY ST ZIP	PLANTATION, FL 33325
TITLE	~~D~~	21 TITLE	D ☒ Change ☐ Addition
NAME	~~FEBLES, ERIC I~~	22 NAME	FEBLES, ERIC I.
STREET ADDRESS	~~8022 N.W. 2ND ST.~~	23 STREET ADDRESS	51 N.W. 115 AVE. SUITE 104
CITY ST ZIP	~~PLANTATION FL 33324~~	24 CITY ST ZIP	PLANTATION, FL 33325
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY ST ZIP		34 CITY ST ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY ST ZIP		44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 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)(i), 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: [redacted] Angela Alvarez 4-20-95 472-0467
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0233452 CP