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 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000034236 (7)**

1. Corporate Name

BRAZILIAN TRADE AND TELEMARKETING, INC.

BTT TRADING, INC.

Principal Place of Business	Mailing Address
151 MAJORCA AVE CORAL GABLES FL 33134	151 MAJORCA AVE CORAL GABLES FL 33134

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: 05/02/1994

3a. Date of Last Report

4. FEI Number: 65-0490840 ☐ 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 liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 150 SE. 2nd Avenue	26 150 SE. 2nd Avenue
22 Suite 1105	27 Suite 1105
23 Miami, FL	28 Miami, FL
24 33131 25 USA	29 33131 30 USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
PRATS, GABRIEL 151 MAJORCA AVE CORAL GABLES FL 33134	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 607.0502 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(S)

12. OFFICERS AND/OR DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND/OR DIRECTORS
TITLE PD NAME ELFLER, BRUNO STREET ADDRESS 151 MAJORCA AVE CITY-ST-ZIP CORAL GABLES FL 33134	TITLE PDT ☐ Change ☐ Addition NAME ELFLER, BRUNO STREET ADDRESS 150 S.E. 2nd Avenue, #1105 CITY-ST-ZIP Miami, FL 33131
TITLE VSD NAME MONTEIRO, RICARDO STREET ADDRESS 151 MAJORCA AVE CITY-ST-ZIP CORAL GABLES FL 33134	TITLE DVS ☐ Change ☒ Addition NAME SILVA, PATRICIA STREET ADDRESS 150 S.E. 2nd Avenue, # 1105 CITY-ST-ZIP Miami, FL 33131
TITLE VTD NAME ALTIMARI, RUBENS S STREET ADDRESS 151 MAJORCA AVE CITY-ST-ZIP CORAL GABLES FL 33134	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing is accurate and does not qualify for the exemptions 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 added by this report or on an attachment with an address.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-95
Date

(305)373-3515
Daytime Phone #

0137070 CP