

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000037198 (6)

1. Corporation Name

MALL TRADING, INC.



Principal Place of Business

Mailing Address

3622 SW 132 PLACE
SUITE 11-C
MIAMI FL 33175
US

3622 SW 132 PLACE
SUITE 11-C
MIAMI FL 33175
US

3. Date Incorporated or Qualified
05/17/1994

3a. Date of Last Report
04/20/1995

2. Principal Place of Business

2a. Mailing Address

21 7902 NW 36 St

26 7902 NW 36 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 202

27 SUITE 202

City & State

City & State

23 MIAMI, FL

28 MIAMI FL

Zip

Country

Zip

Country

24 33166

25 USA

29 33166

30 USA

4. FEI Number

APPLIED FOR 650591411

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. Yes ☒ No ☐

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LLENIN, MANUEL M
9230 S.W. 40TH ST.
SUITE 11-C
MIAMI FL 33165

81 Name

MANUEL M. LLENIN

82 Street Address (P.O. Box Number is Not Acceptable)

7902 NW 36 St

83

SUITE 202

84 City

MIAMI FL

FL

85 Zip Code

33166

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

Manuel M. Llenin

(NOTE: Registered Agent signature required when reinstating)

2/9/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME LLENIN, MANUEL M
STREET ADDRESS 3622 S.W. 132ND PLACE
CITY- ST- ZIP MIAMI FL 33175

TITLE D ☐ DELETE
NAME LLENIN, MERCEDES
STREET ADDRESS 3622 S.W. 132ND PLACE
CITY- ST- ZIP MIAMI FL 33175

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

1 1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

2 1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

3 1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

4 1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

5 1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

6 1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/96

(205) 225-0180

DATE

Daytime Phone #

CR2E034 (12/95)