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FILED
Apr 24 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000061852 (7)

1. Corporation Name
INTRACO, USA INC.



Principal Place of Business
16200 N.E. 13 AVE.
SUITE 102
NORTH MIAMI BEACH FL 33162
US

Mailing Address
16200 N.E. 13 AVE.
SUITE 102
NORTH MIAMI BEACH FL 33162
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 16240 NE 13TH AVENUE

26 16240 NE 13TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State
23 N. MIAMI BEACH, FL

27 City & State
28 N. MIAMI BEACH, FL

24 Zip 33162 25 Country USA

29 Zip 33162 30 Country USA

3. Date Incorporated or Qualified

08/22/1994

4. FEI Number

65-0553147

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

NG, GINA
1421 NORTH VENITIAN WAY
SUITE 102
MIAMI FL 33139

10. Name and Address of New Registered Agent

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 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME NG, GINA
STREET ADDRESS 1421 NORTH VENITIAN WAY
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE DV
NAME NG, KEIRON
STREET ADDRESS 16200 N.E. 13 AVE.
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE DT
NAME NG, KEITH
STREET ADDRESS 16200 N.E. 13 AVE.
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ DELETE

TITLE DS
NAME NG, KENNETH
STREET ADDRESS 16200 N.E. 13 AVE.
CITY-ST-ZIP NORTH MIAMI BEACH FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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:

GINA NG

1/5/99

CR2E034 (10/97)