

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 8:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000065616 (2)

1. Corporation Name

Yael Trading Company, Inc.

Principal Place of Business

8092 NW 67 ST
MIAMI FL 33166

Mailing Address

8092 NW 67 ST
MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/07/1994

3a. Date of Last Report

2. Principal Name of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

4. FEI Number

65-2541877

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

TESONE, ALBERTO
8092 NW 67 ST
MIAMI FL 33166

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Agent for the corporation. The person who is authorized to sign for the corporation.

Signature of Registered Agent. The person who is authorized to sign for the corporation.

Signature of Secretary of State.

12. OFFICERS AND DIRECTORS

12.1

NAME

12.2

STREET ADDRESS

12.3

CITY, ST, ZIP

12.4

NAME

12.5

STREET ADDRESS

12.6

CITY, ST, ZIP

12.7

NAME

12.8

STREET ADDRESS

12.9

CITY, ST, ZIP

12.10

NAME

12.11

STREET ADDRESS

12.12

CITY, ST, ZIP

12.13

NAME

12.14

STREET ADDRESS

12.15

CITY, ST, ZIP

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12.

13.1

NAME

13.2

STREET ADDRESS

13.3

CITY, ST, ZIP

13.4

NAME

13.5

STREET ADDRESS

13.6

CITY, ST, ZIP

13.7

NAME

13.8

STREET ADDRESS

13.9

CITY, ST, ZIP

13.10

NAME

13.11

STREET ADDRESS

13.12

CITY, ST, ZIP

13.13

NAME

13.14

STREET ADDRESS

13.15

CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.01(2)(b), Florida Statutes. I further certify that the information was obtained from the 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, on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALBERTO TESONE

4/27/95 305-599-7178