

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000070654

1. Corporation Name
J H B LATIN AMERICAN TRADE, INC.

Principal Place of Business

2324 NW 78TH STREET
MIAMI FL 33147
US

Mailing Address

2324 NW 78TH STREET
MIAMI FL 33147
US

2. Principal Place of Business

21 9248 Grand Canal Dr.

Suite, Apt. #, etc.

22 City & State
23 Miami, Florida

24 Zip 33174 25 Country US

2a. Mailing Address

26 9248 Grand Canal Dr.

Suite, Apt. #, etc.

27 City & State
28 Miami, Florida

29 Zip 33174 30 Country US

9. Name and Address of Current Registered Agent

~~CASILLLO, BLAS A~~
~~11421 SW 32ND LANE~~
~~MIAMI FL 33126~~

3. Date Incorporated or Qualified

09/26/1994

4. FEI Number

65-0131394

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 the current year Intangible
Personal Property Tax.

Yes ☒ No ☐

10. Name and Address of New Registered Agent

81 Name

ROA, JOHN

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

9248 GRAND CANAL DR

83

84 City

MIAMI

FL

85 Zip Code

33174

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 607.0506, Florida Statutes.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

APRIL 19, 1999.

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ROA, JOHN
STREET ADDRESS 8625 NW 8TH STREET
CITY-ST-ZIP MIAMI FL

TITLE ☒ DELETE

NAME ~~CASILLLO, BLAS A~~
STREET ADDRESS ~~11421 SW 32ND LANE~~
CITY-ST-ZIP ~~MIAMI FL 33126~~

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PST ☒ Change ☐ Addition

1.2 NAME ROA, JOHN
1.3 STREET ADDRESS 9248 GRAND CANAL DR
1.4 CITY-ST-ZIP MIAMI FL 33174

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, with all other like empowered.

SIGNATURE: *[Signature]* APR 19 1999 (305) 615-6156
Signature and typed or printed name of signing officer or director

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90105 023 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (11/98)