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FILED
May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000082489 (3)

1. Corporation Name

INTERBRASIL TRADING CORPORATION

Principal Place of Business

3064 N.W. 72ND AVENUE
MIAMI FL 33122

Mailing Address

3064 N.W. 72ND AVENUE
MIAMI FL 33122-1314

3. Date Incorporated or Qualified

11/10/1994

3a. Date of Last Report

09/04/1996

2. Principal Place of Business

21 2910 NW 72nd. AVE.

Suite, Apt. #, etc.

22 City & State

23 MIAMI, FL.

Zip

24 33122

Country

25 USA

2a. Mailing Address

26 2910 NW 72nd. AVE.

Suite, Apt. #, etc.

27 City & State

28 MIAMI, FL.

Zip

29 33122

Country

30 USA

4. FEI Number

65-0533767

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

9. Name and Address of Current Registered Agent

MACDANIEL, JOHN M
TWO S BISCAYNE BLVD
ONE BISCAYNE TOWER SUITE 2075
MIAMI FL 33131

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

D
ZICCARDI, ROBERTO M
RUA IANDU 70
SAO PAULO BRAZIL 05121 150

TITLE

D
ISHIKAWA, JOSE A
RUA REGINALDO DA SILVA 183
OSASCO SAO PAULO BRAZIL

TITLE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)