

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley H. Meekins
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000087408 (8)**

1. Corporation Name

AREMAR TRADING CORP.

Principal Place of Business

**8225 LAKE DR SUITE C-403
MIAMI FL 33166**

Mailing Address

**8225 LAKE DR SUITE C-403
MIAMI FL 33166**

2. Principal Place of Business

21 **18740 N.W. 3rd St.**

State Apt. #, etc.

22
City & State

23 **Pembroke Pines, FL**

Zip

24 **33029**

County

9. Name and Address of Current Registered Agent

**RAVELO, ROSE M
8225 LAKE DR SUITE C-403
MIAMI FL 33166**

2a. Mailing Address

26 **18740 N.W. 3rd St.**

State Apt. #, etc.

27
City & State

28 **Pembroke Pines, FL**

Zip

29 **33029**

County

3. Date incorporated or Qualified

12/01/1994

3a. Date of Last Report

05/17/1995

4. FEI Number

65-0534775

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. 193.032
Florida Statutes. ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

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

18740 N.W. 3rd St.

83

84

Pembroke Pines

FL

85

Zip Code

33029

11. Pursuant to the provisions of Sections 607.011 through 607.014, 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, thereby accepting the appointment of a registered agent. I am familiar with and accept the obligations of Sections 607.011 through 607.014, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE

DPTS

☐ DELETE

NAME

RAVELO, ROSE M

STREET ADDRESS

8225 LAKE DR SUITE C-403

CITY, ST, ZIP

MIAMI FL 33166

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

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☐ DELETE

14. I do hereby certify that the information supplied with this filing is voluntary, truthful and correct, for the exemption provided in Section 119.07(2)(b), Florida Statutes. I further certify that the information included on this annual report is supplemental and not required by law, 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, and that the foregoing information is true and correct. To be signed and reported by, Chairman, Florida Statutes, and that my name appears in Block 12 or Block 13. Change location of agent with an address.

SIGNATURE:

Rose M. Ravelo

Rose M. Ravelo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED
Apr 19, 1996 08:00 AM
Secretary of State



CR2E034 (12/95)