·· 2005

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000087408

FILED
Aug 08, 2005 8:00 am
Secretary of State

08-08-2005 90046 042 ***550.00

1. Entity Nam	e		1					
Aremar	Trading Corp.							
	DO NOT WRIT	E IN THIS SPAC	Æ					
						5.	nnei	357
Principal Place of Business						0	JOUC	1357
7300 N. Suite, Apt.	.W. 12th St.	7300 N.W.	<u>19th</u>	St				
Suite Apr.		Suite, Apt. #, etc. Suite 101				DO NOT WRITE IN THIS	SPACE	
City & State City & State				(· · · - · · · · · · · · · · · · · · ·			Applied For	
	FL Country	Miami, FL	Count	<u> </u>	65-	- <u>0534775</u>	\$9.7	Not Applicable
Zip 33126-1	Country 1222 USA	Zip 33126-1222	Count 2 USA	•	5. C	Certificate of Status Desired	•	5 Additional equired
33120 1	DO NOT WRITE IN		- 1001		7. Nam	e and Address of Current Registe		
				Name del Va	۔ مالد	Manuel R.	-	ļ
				Street Addre	ss (P.O. E	Box Number is Not Acceptable)		
				<u> 7300 N</u>	<u>I.W.</u>	19th St.		···
				Suite	101			
				City		F	Zip	Code 3126-1221
8 The above	named entity exhaults this statem	ent for the number of cha	naina its o	Miami	or register	ed agent, or both, in the State of Flo		
	t the obligations of registered age		mgmg no n	·	or regioner	ou agon, or bon, in the order or the		, , , , , , , , , , , , , , , , , , , ,
SIGNATURE				(MOTE Carrietes	i - i - i - i - i - i - i - i		De	îĒ.
	Signature, typed or printed name of reg nuary 1 May 1 Fee is \$150.00	Sizested afterst stud man a subli-	Cable.	(AO1E: Keâlzreiek	a väeur zië:	nature required when reinstating)		··-
	After May 1, Fee is \$550.00					9. Election Campaign Financing	\Box	\$5.00 May Be
Make Check	Amended UBR is \$61.25 Payable to Florida Department	nf State				Trust Fund Contribution.		Added to Fees
10.	OFFICERS AND DIRECTORS					<u> </u>		
TITLE	D/P/S/T		711	LE .				
NAME	Ravelo, Rafael		920	WE				
STREET ADDRESS CITY - ST - ZIP	Carte Gracica Vivares		±. 2000	REET ADDRESS TY - ST - ZIP				
TITLE	Sto. Dom., Domi	nican Republ		NE .				
NAME			3333	ME .				
STREET ADDRESS			3333	REET ADDRESS				
CITY - \$T - ZIP			cr	N-ST-ZIP				
TITLE			8888	RE .				
NAME			333	ME				
STREET ADDRESS CITY - ST - ZIP			2000	REST ADDRESS PY - ST - ZIP	I	OO NOT WRITE IN TH	S SP	ACE
TITLE			- 200	n e	•			
NAME			336	ME				
STREET ADDRESS	;		SI	REET ADDRESS				
CITY - ST - ZIP			G	TY - ST + ZIP				
TITLE			9399	ne .				
NAME STREET ADDRESS			200	MEET ADDRESS				
CITY - ST - ZIP			35000	TY-ST-ZIP				
TITLE			333	r <u>te</u>				
NAME			3333	ONE.				
STREET ADDRESS	S		0.833	REET ADDRESS				
	1		B324		ockobban444444666			
CITY - ST - ZIP	<u> </u>		100	TY - ST - ZIP			<u> </u>	

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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STF FL32381F.1