PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000088264**1. Corporation Name

PINETREE TRADING CORPORATION INC.

Principal Place	e of Business	Mailing Address			1144114411111			
7335 NW 32ND AVE		7335 NW 32 AVE						
MIAMI FL 33147	7	MIAMI FL 33147		DO NOT WRITE IN THIS SPACE				
US		US				_ 	3 31 ACE	
					3. Date ir corporated or 12/05/1994	Quanted		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number			lied For
21		26		00 00 000001			Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		E Cortifecto of Statue Desired		\$8.75 A		
22		27				Fee Rec		
City & S:ate		City & State		6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution Added to Fees 8. This or reporation owes the current year Intangible			
Zip	Country	Zip	$\overline{}$	untry	1	•		[]No
24	25	_ 29	30		Personal Property Ta 10. Name and Address			
	9. Name and Address of Curre	nt Registered Agent		81 Names		<u> </u>	4 Agent	
DHE	INAS, PATRICIO A			200	ENAS, PATI	KICIO	<u> </u>	
7050 CM 100 DI ACE				82 Street Ac dre	ess (P.O. Box Number is N		#50	_
	WI FL 33183			1)0	1 30. Ucea	u Are	بن ن سر	
Wirth	WIT 1 E 00 100			[83]	Lawrand F	L. 330	19	ļ
				84 City	7	`` _	85 Zip C	de
	to the provisions of Sections 607.05			<u> </u>	<u> </u>	<u> </u>		
office crr	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the obligations for the colliging familiar with a second	cf Florida, Such change was :	authorize	d by the corporatio	n's board of directors. I her	eby accept the app	ointment as reg	stered
SIGNATURE	Signature, typed or printed na ne of registered age	ent and title if applicable. (NOT	<u>·</u> _	d Agent signature required		DATE		
12.		NE) DIRECTORS	13.		ADDITIONS/CHANGE	S TO OFFICERS		
TITLE	S	☐ DELETE	1,1 T	ITLE			Change	Addition
NAME	DUENAS, PATRICIO A		1.2 N	IAME				
STREET ADORESS	7335 NW 32ND AVE		1.3 \$	STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33147		1.4 0	CITY-ST-ZIP				
TITLE	P	☐ DELETE	2.1 7	ITLE			Change	☐ Addition
NAME	DEVOTO, GUILLERMO		2.2 1	IAME				-
STREET ADDRESS	7335 NW 32ND AVE		2.3 8	STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33147		2.4	CITY-ST-ZIP				
TITLE		☐ DELETE	3.11	TILE			☐ Change	Addition
NAME			3.2 N	IAME				
STREET ADDRESS			3.3 9	STREET ADDRESS				
CITY-ST-ZIP			3.4.	CITY-ST-ZIP				
TITLE		☐ DELETE	4.1	NTLE			Change	☐ Addition
NAME			4, 2	NAME				1
STREET ADDRESS			4.3 9	STREET ADDRESS				1
CITY-ST-ZIP			4.4 (CITY-ST-ZIP				
TITLE		☐ DELETE	5.1	TITLE			☐ Change	Addition
NAME			5.21	NAME				
STREET ADDRESS	Į.		5.3 9	STREET ADDRESS				
CITY-ST-ZIP			5.4 (CITY-ST-ZIP				
TITLE		☐ DELETE	6.1	TITLE			Change	☐ Addition
NAME)		6.2	NAME				}
			6.3 9	STREET ADDRESS				1

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0."(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual seport 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 of the receiver or truspee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an addresse, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNING OFFICER OR DIRECTOR

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90096 007 ***150.00

365-693-0131