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Secretary of State

05-17-1999 90003 045 ***156.25

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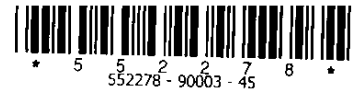
PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra H. Monaghan
Secretary of State
DIVISION OF CORPORATIONS

1996 1999

DOCUMENT # P95000018127 ✓
1. Corporation Name **SAMAVA GLOBAL TRADE, INC.,**
13899 BISCAYNE BOULEVARD, SUITE 137
NORTH MIAMI BEACH, FL 33181



Principal Place of Business

Mailing Address

5/1/99

3. Date Incorporation or Qualified 3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-056-2242

Applied
Not App

21 State, Apt. #, etc

26 State, Apt. #, etc

22 City & State

27 City & State

5. Certificate of Status Desired ☐ **\$8.75** Additio
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May
Added to Fee

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 195.04
Florida Statutes ☐ Yes ☐ No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

David Rolle
1301 N.W. 103 Street Apt 203
Miami, FL 33141

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 agent or registered address, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent familiar with the corporation's business.

SIGNATURE

[Signature]

12. OFFICERS AND DIRECTORS

13. AGENTS, EXCHANGES TO OFFICERS AND DIRECTORS

TITLE **PRESIDENT, SECRETARY & TREASURER** ☐ DELETE
NAME **Charles N. Bullard**

STREET ADDRESS **13899 Biscayne Boulevard**
CITY, ST, ZIP **suite 137 North Miami Beach FL 33181**

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

☐ Change ☐ Add

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 115.07(9)(a), 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 in person by me. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report.