

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000022765 (8)

1. Corporation Name

DD BROS TRADING COMPANY



Principal Place of Business

Mailing Address

~~6830 INDIAN CREEK DR., APT. 306~~
~~MIAMI BEACH FL 33141~~

~~6830 INDIAN CREEK DR., APT. 306~~
~~MIAMI BEACH FL 33141~~

3. Date Incorporated or Qualified
03/21/1995

3a. Date of Last Report

2. Principal Place of Business
21 **999 S. BAYSHORE DR.**

2a. Mailing Address
26 **999 S. BAYSHORE DR.**

4. FEI Number
65-0567281

Applied For
Not Applicable

Suite, Apt., etc.
22 **APT. # 910**

Suite, Apt., etc.
27 **APT. # 910**

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

City & State
23 **MIAMI, FLORIDA**

City & State
28 **MIAMI, FLORIDA**

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

Zip
24 **33131** Country
25 **U.S.A.**

Zip
29 **33131** Country
30 **U.S.A.**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DIEHL, GUILLERMO A
~~6830 INDIAN CREEK DR., APT. 306~~
~~MIAMI BEACH FL 33141~~

81 Name **DIEHL GUILLERMO A.**
82 Street Address (P.O. Box Number is Not Acceptable)
999 S. BAYSHORE DR.
83 **APT. # 910**
84 City **MIAMI** FL 85 Zip Code **33131**

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, type or printed name of registered agent and the applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PO <input checked="" type="checkbox"/> DELETE
NAME	DIEHL, HERNAN J
STREET ADDRESS	6830 INDIAN CREEK DR., APT. 306
CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE	VSD <input type="checkbox"/> DELETE
NAME	DIEHL, GUILLERMO A
STREET ADDRESS	6830 INDIAN CREEK DR., APT. 306
CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE	TD <input checked="" type="checkbox"/> DELETE
NAME	DIEHL, FERNANDO M
STREET ADDRESS	6830 INDIAN CREEK DR., APT. 306
CITY-ST-ZIP	MIAMI BEACH FL 33141
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	P62 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	999 S. BAYSHORE DR. APT. # 910
2.3 STREET ADDRESS	MIAMI, FLORIDA 33131
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 119.07(3)(k), 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: **GUILLERMO A. DIEHL, P62**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB. 16, 1996

(305) 725-9896

Date

Daytime Phone #

CR2E034 (12/95)