

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000034537 (7)

1. Corporation Name

E & A INTERNATIONAL TRADING INC.



Principal Place of Business

Mailing Address

~~710 N.W. 111TH PL.~~
~~#2~~
~~MIAMI FL 33172~~

~~710 N.W. 111TH PL.~~
~~#2~~
~~MIAMI FL 33172~~

2. Principal Place of Business

2a. Mailing Address

21 150 SE 2ND AVE

26 150 SE 2ND AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1010

27 1010

City & State

City & State

23 MIAMI, FL

28 MIAMI, FL

Zip

Zip

24 33131

Country

29 33131

Country

25 US

30 US

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

05/03/1995

4. FCI Number

65-0578425

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. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

150 SE 2ND AVENUE

83

1010

84 City

MIAMI

FL

85 Zip Code

33131

Pursuant to the provisions of Sections 607.0532 and 607.1506, 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 of Registered Agent

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

TITLE NAME ☐ DELETE

D
MARINS, ALEXANDRE R
710 N.W. 111TH PL., #2
MIAMI FL 33172

TITLE NAME ☐ DELETE

D
MARINS, JOSE G
710 N.W. 111TH PL., #2
MIAMI FL 33172

TITLE NAME ☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

1. TITLE ☒ Change ☐ Add or

2. NAME

3. STREET ADDRESS

6170 NW 173RD ST. # 434
MIAMI LAKES, FL 33015

4. CITY- ST- ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

6170 NW 173RD ST #434
MIAMI LAKES, FL 33015

8. CITY- ST- ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY- ST- ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY- ST- ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY- ST- ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY- ST- ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY- ST- ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY- ST- ZIP

300001879723

-06/28/96--01091--027

***200.00

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 hereby 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. I, do hereby certify that I am an officer or director of the corporation and the name or trust name is authorized 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/18/96 (305) 530-8630

CR2E034 (12/95)