

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000037986

1. Entity Name

GETRA - GENERAL TRADING COMPANY



Principal Place of Business

25 SE 2 AVE
#410
MIAMI, FL 33131

Mailing Address

25 SE 2 AVE
#410
MIAMI, FL 33131



03232007

No Chg-P

CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0603294

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VEGA, JOSE M
25 SE 2 AVE
#410
MIAMI, FL 33131

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000689087
04/11/07-80021-021-150.00

10. OFFICERS AND DIRECTORS

TITLE DP
NAME SOUZA, LEONARDO D. S
STREET ADDRESS 25 S.E. 2 AVE 410
CITY-ST-ZIP MIAMI, FL 33131

TITLE SD
NAME ANTONIO, JORGE E
STREET ADDRESS 25 S.E. 2 AVE #410
CITY-ST-ZIP MIAMI, FL 33131

TITLE DT
NAME SOUZA, SILBENE
STREET ADDRESS 25 S.E. 2 AVE #410
CITY-ST-ZIP MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

LEONARDO SOUZA

March 23, 2007

(305) 539-9010