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 # **P95000043716 (6)**

1. Corporation Name

TELEBIP INTERNATIONAL TRADING INC.

Principal Place of Business	Mailing Address
150 S.E.2ND AVENUE #1004 MIAMI FL 33131	150 S.E.2ND AVENUE #1004 MIAMI FL 33131

2. Principal Place of Business 21 34 SE 2nd Ave	2a. Mailing Address 26
Suite, Apt. #, etc. 22 704	Suite, Apt. #, etc. 27
City & State 23 Miami FL	City & State 28
Zip / Country 24 33131 / 25 U.S.	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 06/07/1995
3a. Date of Last Report:
4. FEI Number: 65-0585903 ☐ 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

9. Name and Address of Current Registered Agent

ANDRADE, FERNANDO
150 S.E. 2ND AVENUE
#1004
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: Cury, Luis Claudio
82 Street Address (P.O. Box Number is Not Acceptable): 34 SE 2nd Ave # 704
83
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: _____ DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTD	☐ DELETE	1.1 TITLE	Cury, Luis Claudio	☐ Change ☐ Addition
NAME	CURY, LUIS C		1.2 NAME	34 SE 2nd Ave #704	
STREET ADDRESS	% 150 S.E. 2ND AVENUE #1004		1.3 STREET ADDRESS	Miami FL 33131	
CITY-ST-ZIP	MIAMI FL 33131		1.4 CITY-ST-ZIP		
TITLE	AS	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CURY, LUIS C		2.2 NAME		
STREET ADDRESS	% 150 S.E. 2ND AVE. #1004		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33131		2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(i), 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: _____ 05/17/96 (305) 3738556
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #