Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90062 030 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000047085

1. Corporation	Name	0-17000			
ONLINE	FOREIGN TRADE, INC.				
Principal Place	of Business	Mailing Address			
4761 NW 72ND AVE 4761 NW 72ND AVE					
MIAMI FL 33166 MIAMI FL 33166 US US				DO NOT WRITE IN T	HIS SPACE
00				3. Date Incorporated or Qualifed	
				06/16/1995	<u></u>
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0589019	Not Applicable
Suite, Apt.	¥, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
22		27			
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	Country	Zip	Country	Trust Fund Contribution	
Zip	Country	 	_ '	This corporation owes the current year Personal Property Tax.	r mangiole ☐ Yes ☐ No
24	9. Name and Address of Current	Registered Agent	30	10. Name and Address of New Registe	
	5. Name and Address of Content	regionica Agent	81 Name		
COB	ARRUBIAS, ERNESTO 😾 🔑 🗸			(0.0 5)	
COBARRUBIAS, ERNESTO Y.R. -6122 N.W. 74TH AVE. 4761 NW 72Nd Cr.			82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	M FL 33166		83		
					les Zin Codo
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	les, the above-named o	orporation submits this statement for the purpos	e of changing its registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	t Florida. Such change was a	iutnorizea by the corpoi	ation's board of directors. I hereby accept the a	ppointment as registered
-3-	Triattina, with, and doopt the obligation	0110 011 0000011 0011000011 11			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered Agent signature rec		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	3 AND DIRECTORS IN 12
TITLE	D	☐ DELETÉ	1.1 TITLE	PSTD	Change ☐ Addition
NAME	COBARRUBIAS, ERNESTO		1.2 NAME		
STREET ADDRESS	6122 N.W. 74TH AVE.		1,3 STREET ADDRESS	COVARRUBIAS, ERNESTO JR	1110 uriur 221//
CITY-ST-ZIP	MIAMI FL 33166	Finciere	1.4 CITY-ST-ZIP	432 S. ROYAL POINCIANA B	LVV -MIAMI 33166
TITLE	P	☐ DELETE	2,1 TITLE		
NAME	COVARRUBIAS, ERNESTO SR.		2.2 NAME	COVARRUBIAS, -ERNESTO-SR.	
STREET ADDRESS	432 S ROYAL POINCIANA BLV)	2.3 STREET ADDRESS	432 S. ROYAL POINCIANA B	
CITY-ST-ZIP	MIAMI FL 33166	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	MIAMI SPRINGS, FLORIDA 3	3166 ☐ Change ☐ Addition
TITLE	T DODEDTO DENEE	□ DEFEIE	3.1 HILE 3.2 NAME	Т	
NAME	ROBERTS, RENEE			· ·	
STREET ADDRESS	19711 WHISPERING PINES RD	,	3.3 STREET ADDRESS	ROBERTS, RENEE 19711 WHISPERING PINES R	.D
CITY-ST-ZIP	MIAMI FL 33157	DELETE	3.4, CITY-ST-ZIP	MIAMI, FLORIDA 33157	☐ Change ☐ Addition
TITLE	D COVARRUBIAS ERNESTO	D becel	4. 2 NAME	•	_ , _
NAME	4761 NW 72ND AVE		4.3 STREET ADDRESS		
STREET ADDRESS		Take	4.4 CITY-ST-ZIP		
CITY-ST-ZIP	IAIN-MAILLE 02 IOO /	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		
			6.3 STREET ADDRESS		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: