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

SIGNATURE:

May 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000050907 (1) NORTE SUR TRADING CORP. **Principal Place of Business** Mailing Address 2210 NW 92ND AVE 2210 NW 92ND AVE MIAMI FL 33172 MIAMI FL 33172 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/29/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 7200 Ave 3100 NW 7240 AVE 26 3100 NW 65-0623296 Not Applicable Suite, Apt. #, etc. Sulte, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired # 106 106 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be MIAMI MIAMI 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ALVA, DAVID E 15432 \$W 77 CIRCLE LANE SUITE 205 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33193** 83 Zip Code 84 City 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 ne of registered agent and title if applicat (tored Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 1.1 TITLE FERRO, JOSE L NAME 12 NAME **PZE034** 15801 S.W. 85 ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - 21P DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-7/P CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 DITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-21P DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition Change S 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plock 13 of Plack 13 if Place 13 of Place 13 if Place 13 if Place 13 if Place 13 if Place 14 if Place Block 12 or Block 13 if changed, or on an attachment with an address.

FILED