

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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000079970

1. Corporation Name

GAP TRADING CORP.

Principal Place of Business

Mailing Address

121 SE 1ST STREET, #1017
MIAMI, FL 33131

3. Date Incorporated or Qualified

3a. Date of Last Report

10/16/1995

2. Principal Place of Business

2a. Mailing Address

21 7203 NW 12 STREET

26 Suite, Apt #, etc.

22 Suite, Apt #, etc.

23 City & State

MIAMI FL

24 Zip

33126

25 Country

DADE

26 Zip

30 Country

4. FEI Number

65-0621864

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

MARTINS, PEDRO V
7904 HARDING #3-A
MIAMI BEACH, FL 33141

10. Name and Address of New Registered Agent

81 Name

MARTTI KALKAS

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

15419 SW 54 STREET

83

84 City

MIAMI

FL

85 Zip Code

33185

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 *Martti Kalkas*

MARTTI KALKAS

4/28/97

(Signature of officer or director of corporation and fee if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME MARTINS, PEDRO V.
STREET ADDRESS 7904 HARDING #3-A
CITY, ST, ZIP MIAMI BEACH, FL 33141

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

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CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME TERESA ARAM
13 STREET ADDRESS
14 CITY, ST, ZIP

21 TITLE ☐ Change ☒ Addition
22 NAME TERESA ARAM
23 STREET ADDRESS 1734 NW 81 WAY
24 CITY, ST, ZIP PLANTATION, FL 33322

31 TITLE ☐ Change ☒ Addition
32 NAME ANDRE BRENNAND DE SOUZA
33 STREET ADDRESS 915 NW 1ST AVE #211
34 CITY, ST, ZIP MIAMI, FL 33136

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do 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, changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28

Date

Daytime Phone #

CR2E034 (9/96)