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Apr 21 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000081288 (9)

1. Corporation Name  
UNIGLOBE TRADING CORP.



Principal Place of Business

4141 N. MIAMI AVENUE  
SUITE 314  
MIAMI FL 33137  
US

Mailing Address

C/O CAROLY PEDERSON  
3111 STIRLING ROAD  
FORT LAUDERDALE FL 33312-6668  
US

3. Date Incorporated or Qualified  
10/23/1995

3a. Date of Last Report  
04/29/1996

2. Principal Place of Business

21 4100 NE 2nd AVENUE

2a. Mailing Address

26 4100 NE 2nd AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 304

City & State

27 Suite 304

City & State

23 Miami FL

Zip

Country

28 Miami FL

Zip

Country

24 33137

25 U.S.A.

29 33137

30 U.S.A.

4. FEI Number

APPLIED FOR 65-0658690

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

PEDERSEN, CAROLY  
3111 STIRLING ROAD  
FT. LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME LIU, YUFANG  
STREET ADDRESS 4141 N MIAMI AVE. SUITE 314  
CITY-ST-ZIP MIAMI FL 33137

TITLE D ☐ DELETE  
NAME LIU, SONGHE  
STREET ADDRESS 4141 N MIAMI AVE. SUITE 314  
CITY-ST-ZIP MIAMI FL 33137

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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  
13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 15th, 1997

Date

305-948-9105

Daytime Phone #

CR2E034 (9/96)