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FILED

Jan 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P95000082186 (4)

1. Corporation Name

BELFORD TRADING CO.

Principal Place of Business

Mailing Address

12875 SW 199 AVE  
MIAMI FL 33196  
US

12875 SW 199 AVE  
MIAMI FL 33196  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/26/1995

4. FEI Number

65-0615026

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

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 fee if applicable

(NOTE: Registered Agent's signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD  
NAME MANUEL PEREZ GALAN  
STREET ADDRESS 1646 WEST 38 PLACE  
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE VT  
NAME MAURI, ANA T  
STREET ADDRESS 1646 WEST 38 PLACE  
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

TITLE S  
NAME PENARREDONDA, ARTURO  
STREET ADDRESS 1646 WEST 38 PLACE  
CITY-ST-ZIP HIALEAH FL 33012

☐ DELETE

TITLE PD  
NAME RICARDO A. AVILA  
STREET ADDRESS 1646 W 38 PL  
CITY-ST-ZIP HIALEAH FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 12875 SW 199 AVE. ☒ Change ☐ Addition  
1.2 NAME MIAMI, FL. 33196

1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE 12875 SW 199 AVE. ☒ Change ☐ Addition  
2.2 NAME MIAMI, FL. 33196

2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE 12875 SW 199 AVE. ☒ Change ☐ Addition  
3.2 NAME MIAMI, FL. 33196

3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE 12875 SW 199 AVE. ☒ Change ☐ Addition  
4.2 NAME MIAMI, FL. 33196

4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE: *Manuel Perez Galan* MANUEL PEREZ GALAN 1-6-98 (305) 255-8772

CR2E034 (10/97)