

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

FILED
May 17, 1999 8:00 am
Secretary of State

05-17-1999 90082 001 ***150.00

DOCUMENT # P 950000 97168

1. Corporation Name
ORION TRADING, CO.

Principal Place of Business

5400 RIVIERA DR.
CORAL GABLES, FL 33146

Mailing Address

SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/26/95

4. FEI Number

65-0649855

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 the current year Intangible
Personal Property Tax.

☐

Yes

☒ No

9. Name and Address of Current Registered Agent

DANTE PEZZATINI
5400 RIVIERA DR.
CORAL GABLES, FL 33146

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 Dante Pezzatini DANTE PEZZATINI

5/01/99

(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 PSD ☐ DELETE

NAME DANTE PEZZATINI

STREET ADDRESS 5400 RIVIERA DR

CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE VD ☐ DELETE

NAME FULVIO PEZZATINI

STREET ADDRESS 5400 RIVIERA DR

CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE D ☐ DELETE

NAME ROSA MARIA PEZZATINI

STREET ADDRESS 5400 RIVIERA DR

CITY-ST-ZIP CORAL GABLES, FL 33146

TITLE TD ☐ DELETE

NAME ILARIA PEZZATINI

STREET ADDRESS 5400 RIVIERA DR

CITY-ST-ZIP CORAL GABLES

TITLE D ☐ DELETE

NAME AGOSTINO PEZZATINI

STREET ADDRESS 5400 RIVIERA DR

CITY-ST-ZIP CORAL GABLES, FL 33130

TITLE ☐ DELETE

STREET ADDRESS

ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE: Dante Pezzatini DANTE PEZZATINI 5/5/99 305-785-7578

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)