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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000002419 (5) DOCUMENT #

MIRATUR TRADING CORPORATION

## **FILED** May 18 1998 8:00am Secretary of State



| L  | <del></del>                              |                                     |   |  |                              |
|--|--|-------------------------------------|---|--|------------------------------|
| Principal Place of Business Mailing Address  |  |                                     |   | 88118 11811 81881 HEIS (81) 1881   |                              |
|  |  | BOB1 NW 67TH STREET                 |   | 1  |                              |
| MIAM! FL 33166   |  | MIAMI FL 33166                      |   | DO NOT WRITE IN THIS SPACE   |                              |
|  |  |                                     |   | 3. Date Incorporated or Qualified  |                              |
|  |  |                                     |   | 01/09/1996   |                              |
| 2. Principal F   | Place of Business                        | 2a. Mailing Address                 |   | 4. FEI Number  | Applied For                  |
| 21   |  | 26                                  |   | 65-0640442   | Not Applicable               |
| Suite, Apt.  | #, etc.                                  | Suite, Apt. #, etc.                 |   | 5. Certificate of Status Desired   | \$8.75 Additional            |
| 22   |  | 27                                  |   |  | Fee Required                 |
| City & Stal  | te                                       | City & State                        |   | 6. Election Campaign Financing   | <b>\$5.00</b> May Be         |
| Zip  |  | [28]                                | 1 0   | Trust Fund Contribution  | Added to Fees                |
| 24   | Country                                  | Zψ                                  | Country                                       | 8. This corporation owes or has paid the                                 |                              |
| 24]  | 25<br>9. Name and Address of Curren      | 29<br>nt Registered Agent           | 30  | Personal Property Tax due June 30.  10. Name and Address of New Register | Yes No                       |
| RE   | NARIE, MAURA                             |                                     | 81 Name                                       | 10. Namo and Housess of New Hogiston                                     | ou Agont                     |
| 9330 NW 37TH MANOR   |  |                                     |   |  |                              |
| SUNRISE FL 33351   |  |                                     | 82 Street Addr                                | ress (P.O. Box Number is Not Acceptable)                                 |                              |
|  |  |                                     | 83  |  |                              |
|  |  |                                     | 84 City                                       |  | 85 Zip Code                  |
| 44 Durawant  | to the previous of Continue COT OV       | 30 4 COZ 46 OO El                   |   | <u> </u>   | L 85 ZID COOR                |
| 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, typic for profest name of region red ascent or the frage leads to th |  |                                     |   |  |                              |
| 12.  | <del></del>                              | D DIRECTORS                         | 13.   | ADDITIONS/CHANGES TO OFFICERS  | -                            |
| TITLE  | <b>P</b>                                 | ☐ DELE TE                           | 1 1 TITLE                                     |  | Change Addition              |
| NAME   | GLIKAS, MARCOS                           |                                     | 12 NAME                                       |  | -                            |
| STREET ADDRESS   | 8081 NW 67TH STREET                      |                                     | 13 STREET ADDRESS                             |  |                              |
| CITY-ST-ZIP  | MIAMI FL 33166                           |                                     | 1.4 CiTY - ST - ZIP                           |  |                              |
| TITLE  | VP                                       | DELETE                              | 21 TITLE                                      |  | ☐ Change ☐ Addition          |
| NAME   | GLIKAS, CLARICE                          |                                     | 2.2 NAME                                      |  |                              |
| STREET ADDRESS   | 8081 NW 67TH STREET                      |                                     | 2.3 STREET ADDRESS                            |  |                              |
| CITY-ST-ZIP  | MIAMI FL 33166                           |                                     | 2. 4 CHY+\$1+ZIP                              |  |                              |
| TìTL€  | I  | □ DELETE                            | 3.1 ₹01.€                                     |  | Change Addition              |
| NAME   | GLIKAS, ALEX                             |                                     | 3.2 NAME                                      |  |                              |
| STREET ADDRESS   | 8081 NW 67TH STREET                      |                                     | 3.3 STREET ADDRESS                            |  |                              |
| CITY - ST - ZIP  | MIAMI FL 33166                           |                                     | 3.4. CITY - \$1 - 7IP                         |  |                              |
| TITLE  |  | DELETE                              | 4 1 TITLE                                     |  | Change Addition              |
| NAME   |  |                                     | 4. 2 NAME                                     |  |                              |
| STREET ADDRESS   |  |                                     | 4.3 STREET ADDRESS                            |  |                              |
| CITY-ST-ZIP  |  | DINCETT                             | 4.4 CHY-ST-7IP                                |  | [] A                         |
| TIFLE  |  | L DELETE                            | 5.1 MILE                                      |  | Change L Addition            |
| NAME<br>CTOTES ADDOCCO   |  |                                     | 5.2 NAME                                      |  | ŀ                            |
| STREET ADDRESS   |  |                                     | 5.3 STREET ADDRESS                            |  |                              |
| CITY-ST-ZIP<br>TITLE   |  | ☐ OELETE                            | 5.4 CITY-ST-ZIP<br>6 1 TITLE                  |  | Change Addition              |
| NAME   |  |                                     | ı j   |  | Charitie T Worldon           |
| STREET ADDRESS   |  |                                     | 6.2 NAME                                      |  |                              |
| CITY-ST-ZIP  |  |                                     | 63 STREET ADDRESS                             |  | Ì                            |
|  | certify that the information supplied wi | ith this filing does not qualify fo | # 64 CHY-ST-ZIP<br>or the exemption stated in | Section 119.07(3)(i), Florida Statutes. I further                        | certify that the information |

officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes: All that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

11 00 00