SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

CITY-ST-ZIP

Aug 21 1997 8:00am PROFIT * FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # P96000016464 (5) TRANSNATIONAL TRADING CORPORATION Principal Place of Business Mailing Address * 7381 NW 54 ST. -7391 NW 54 ST-MIAMI FL-00100 MIAMI FL 83168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a, Date of Last Report 02/20/1996 2a, Mailing Address 2. Principal Place of Business FEI Number 65 - 0646 405 Applied For Same as Left 7383 N.W.545 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Be 28 Added to Fees 23 Trust Fund Contribution Country Zip This corporation owes or has paid the current year Intangible 6 25 USA 29 Name and Address of Current Registered Agent 30 Personal Property Tax due June 30. Name and Address of New Registered Agent DIAZ. NELSON I 6852 W. FLAGLER ST. Street Address (P.O. Box Number is Not Acceptable) **MIAM! FL 33144** 83 84 City Zip Code 85 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. (NOTL: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1,1 TITLE President Change Addition TITLE Kenneth S.C. LO SUN, PHILLIP Z 1.2 NAME NAME 7381 NW 54 ST. STREET ADDRESS 1.3 STREET ADDRESS 7383 NW 548t. **MIAMI FL 33166** MIAMI FL 32166 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 10118 ☐ Change Addition TITLE TS LIU, JOE S NAME 2.2 NAME STREET ADDRESS 7381 NW 54 ST. 2.3 STREET ADDRESS **MIAMI FL 33166** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 51 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

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 in an attachment with an address

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

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