## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550:00

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000017871 (0)

BALEARIC TRADING CORP.

Principal Place of Business

STREET ADDRESS

Mailing Address

1348 Washington Ave Miami Beack, Fla 33139

1348 Washington Ave Miami Beach, Fla

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 33139 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 65-064 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intengible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name BUCHBINDER, HARCELD Street Address (P.O. Box Number is Not Acceptable) 1348 WASHINGTON ANE 83 MIAMI REACH FI 33139 84 City 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, typical or produce name of regulariest agent and title diapplicable (NOTE: Registered Agent signature required when re-installing) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. □ DELETE 113016 TITLE Change MARCELO BUCHOINDER NAME 12 NAME 1848 Washington Avenue Miami Beach, fl 33/39 STREET ADDRESS 13 STREET ADDRESS CITY-ST-7IP 1.4 CITY - \$T - ZIP THE 2.1 TITLE Change Addition MARIA E. ROUCHBINDER NAME 2.2 NAME 348 Washington Avenue STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY-ST-ZIP TITLE 3.1 TITLE Change Addition NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4 CITY-ST-ZIP CITY-ST-ZIP ■ DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE TITLE ☐ Addition 51 TITLE Change NAME 5 2 NAME STRÉET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELFTE TITLE 6.1 TilluE ☐ Addition 600002465425° -03/23/98--01060--032 6.2 NAME

14. Thereby 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 supplied ental 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.

MARCELO GABRIEL BULL SINDER. 3/11/88 /305-5359660 **SIGNATURE** 

6.3 STREET ADORESS

CR2E034 (10/97

FILED

Mar 23 1998 8:00am

Secretary of State