

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

DOCUMENT # P96000034536

 1. Corporation Name
LANDIN TRADING CORP.

 Principal Place of Business
**735 SW 48 STREET
 MIAMI FL 33155**

 Mailing Address
**8295 SW 48 STREET
 MIAMI FL 33155**


DO NOT WRITE IN THIS SPACE

 3. Date Incorporated or Qualified
04/19/1996

 4. FEI Number
65-0661161

 Applied For
☐ Not Applicable

 5. Certificate of Status Desired ☐ **\$8.75** Additional
 Fee Required

 6. Election Campaign Financing ☐ **\$5.00** May Be
 Trust Fund Contribution Added to Fees

 8. This corporation owes the current year Intangible
 Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LANDIN, ENRIQUE
 8295 SW 48 STREET
 MIAMI FL 33155**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

84. City

FL 85. Zip Code

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.

(NOTE: Registered Agent signature required when resigning)

DATE

2. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LANDIN, ENRIQUE	
STREET ADDRESS	8295 SW 48 STREET	
CITY-STATE-ZIP	MIAMI FL 33155	
TITLE	VO	☐ DELETE
NAME	LANDIN, ENRIQUE M.	
STREET ADDRESS	8295 SW 48 STREET	
CITY-STATE-ZIP	MIAMI FL 33155	
TITLE	STD	☐ DELETE
NAME	LANDIN, SILVIA M.	
STREET ADDRESS	8295 SW 48 STREET	
CITY-STATE-ZIP	MIAMI FL 33155	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☐ Change ☐ Addition
1.2 NAME	ENRIQUE LANDIN	
1.3 STREET ADDRESS	8295 SW 48 ST	
1.4 CITY-STATE-ZIP	MIAMI, FL 33155	
2.1 TITLE	VICE-PRESIDENT	☐ Change ☐ Addition
2.2 NAME	ENRIQUE M. LANDIN	
2.3 STREET ADDRESS	8295 SW 48 ST	
2.4 CITY-STATE-ZIP	MIAMI, FL 33155	
3.1 TITLE	SECRETARY	☐ Change ☐ Addition
3.2 NAME	SILVIA M. LANDIN	
3.3 STREET ADDRESS	8295 SW 48 ST	
3.4 CITY-STATE-ZIP	MIAMI, FL 33155	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

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: **Enrique Landin**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01-13-99

305 229 8141

CR2E034 (1/98)