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

DOCUMENT # P96000036239 (7)

SUCRE TRADING CORPORATION

Principal Place		Mailing A									
4900 N. OCE	AN BLVD.	4900 N. #1706	OCEAN BLVD.								
#1706 Ft. Lauderd		FT. LAUDERDALE FL 33308					DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or 0 04/26/1996	Qualified		
2. Principal P	tace of Business	2a. Mailin	g Address			% I	. (4. FEI Number		F	Applied For
21 100	N. Biscayne Blud	26 101	D N. E	315 CA	705	BIL	7cl	65-0669736			Not Applicable
Suite, Apt.	1107	27 #	Apt #, etc.					5. Certificate of Status D	esired		Additional Required
City & State		City &		FL				6. Election Campaign Fir	~ —	,	May Be
23 Mian	Country	28 74 (ami,		ountry			Trust Fund Contribution	·		d to Fees
24 33 13	25 US	29 3 3	132		US			 This corporation owes Personal Property Tax 	•		∏ No
27,00	9. Name and Address of Curre		gent	1001				10. Name and Address of			
LAI	W FIRM OF MANFRED ROSENO	OW, P.A.			81	Name					
1	25 CORAL WAY	•			82	Street	Addres	ss (P.O. Box Number is Not	Acceptable)		
MIA	AMI FL 33145										
					83						
					84	City				85 Zip	p Code
44 Purguent	to the provinces of Continue CO7 OL	00 and 607 1606	Librida Cini	Luion tho		namod		ration submits this statemen	FI		ita ragiotara d
11. Pursuant office or r	to the provisions of Soctions 607.05 egistered agent, or both, in the Stati m familiar with, and accept the oblic	e of Florida, Suc	h change wa	s authori	red by	the corp	corpor coratio	ration submits this statement of directors. I her	eby accept the ap	or changing spointment a	is registered
1	m tamiliar with, and accept the obliq	gations of Section	on 607.0505,	Florida S	tatutes						
SIGNATURE	Signature, typed or printed name of registered ag	ent and ble diapplical	bie (N	OTF: Regist	erud Age	nt signature	required	when reinstating)	DATE		
12.		D DIRECTORS		13	3.			ADDITIONS/CHANGES	TO OFFICERS AN	ID DIRECTO	ORS IN 12
TITLE	PD		DELETE	1.1	TITLE					Change	Addition
NAME	PABON, CARLOS A			1.2	2 NAME			b ib. Biscay ne	L Blud.	A 110'	7
STREET ADORESS	4900 N. OCEAN BLVD. #170) 6		1.3	STREET	address		•	-	•	
CITY-ST-ZIP	FT. LAUDERDALE FL 33308		F-1		1 CITY-S	r-zip	MI	ami, FL 3	3132		
TITLE	SD DARON BEATRIZE		☐ DELETE		TITLE					Change	Addition
NAME	DE PABON, BEATRIZ E 4900 N. OCEAN BLVD. #170	ne.			NAME		100	W. BIS CAYTI	Blud	f 1107	7
STREET ADDRESS	FT. LAUDERDALE FL 33308	ю				ADDRESS		_ ,	1132		
CITY-\$T-ZIP TITLE	FI. CAUDENDALE I C 93308		DELETE		4 CITY - S 1 TITLE	T-ZIP		ami, PL. 33	<u> </u>	Change	Addition
NAME			occur		NAME		6. 1	- Gassia I	M .	LL Change	; EJ Addition
STREET ADDRESS						ADDRESS	Tell	our winder	a Bluck	# 110	27
				1			10	o p. piscad	49 2	,, ,	<u>-</u>
CITY-ST-ZIP TITLE			DELETE		<u>i. City - S</u> 1 title	1-715	MI	MAIL I P C 2 3	· · · ·	Change	Addition
NAME					2 NAME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					CITY-S				•		
TITLE			DELETE		TITLE					Change	Addition
NAME				5.2	NAME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					CITY-S						
TITLE			DELETE		TITLE				******	Change	Addition
NAME				6.2	NAME		l				;
CTDEET ADDRESS				1		ADDECC					

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.

SIGNATURE D MULA Jone /abys

ANGELA PABON, 4-21-98 305-663-1511

FILED

May 05 1998 8:00am

Secretary of State