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Feb 18 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortha  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000043313 (1)

1. Corporation Name  
GIANNI VALLENTI TRADE CORP.

Principal Place of Business  
7601 E TREASURE DRIVE, 2102  
NORTH BAY VILLAGE  
MIAMI FL 33141

Mailing Address  
7601 E TREASURE DRIVE, 2102  
NORTH BAY VILLAGE  
MIAMI FL 33141-4368



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified  
05/21/1996

3a. Date of Last Report  
N/A

4. FEI Number  
65-0672533

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STUMPF, IVAN S JR  
7601 E TREASURE DRIVE, 2102  
NORTH BAY VILLAGE  
MIAMI FL 33141

81 Name Luis GARCIA JR  
82 Street Address (P.O. Box Number is Not Acceptable)  
9961 SW 13th Terr.  
83  
84 City Miami FL 85 Zip Code 33174

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]*  
Signature, typed or printed name of registered agent and title if applicable

*[Signature]* President V. Peridat. 1-27-97  
(NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME STUMPF, IVAN S JR  
STREET ADDRESS 7601 E TREASURE DRIVE, 2102  
CITY-ST-ZIP MIAMI FL 33141

1.1 TITLE President  
1.2 NAME STUMPF, IVAN S. JR.  
1.3 STREET ADDRESS 7601 E TREASURE DR. #2102  
1.4 CITY-ST-ZIP Miami, FL. 33141

TITLE D  
NAME STUMPF, CLAUDIA J  
STREET ADDRESS 7601 E TREASURE DRIVE, 2102  
CITY-ST-ZIP MIAMI FL 33141

2.1 TITLE V. President  
2.2 NAME Luis GARCIA JR  
2.3 STREET ADDRESS 9961 S.W. 13 Terr  
2.4 CITY-ST-ZIP Miami, FL 33174

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-97 (305) 866-3496  
Date Daytime Phone #

3R2E034 (9/96)