

" AMENDED "
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Aug 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000056729

1. Corporation Name

SUPERTRADE OF MIAMI, INC.

Principal Place of Business

1401 BRICKELL AVENUE
SUITE 550
MIAMI, FL 33131

Mailing Address

151 MAJORCA AVENUE
SUITE C
CORAL GABLES, FL 33134

AMENDED

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

7/05/96

4. FEI Number

65-0680050

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 owes or has paid the current year intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

GABRIEL PRATS
151 MAJORCA AVENUE
SUITE C
CORAL GABLES, FL 33134

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME GOMES, JOAO
STREET ADDRESS 25 S.E. 2ND AVENUE, # 240
CITY-ST-ZIP MIAMI, FL 33131

TITLE D ☐ DELETE
NAME MIESSLER, RICHARD
STREET ADDRESS 25 S.E. 2ND AVENUE, # 240
CITY-ST-ZIP MIAMI, FL 33131

TITLE D ☒ DELETE
NAME FUCHTER, EDIO A.
STREET ADDRESS 25 S.E. 2ND AVENUE, # 240
CITY-ST-ZIP MIAMI, FL 33131

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D, S, VP. ☐ Change ☐ Addition
1.2 NAME GOMES, JOAO
1.3 STREET ADDRESS 1401 BRICKELL AVENUE, SUITE 550
1.4 CITY-ST-ZIP MIAMI, FL 33131

2.1 TITLE D, P, T. ☐ Change ☐ Addition
2.2 NAME MIESSLER, RICHARD
2.3 STREET ADDRESS 1401 BRICKELL AVENUE, SUITE 550
2.4 CITY-ST-ZIP MIAMI, FL 33131

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

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

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

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

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.

CP2E034 (10/97)