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 # P96000057778 (8)

MUNROE INTERTRADING, INC.

FILED May 06 1998 8:00am Secretary of State



| Principal Place | of Business | Maiting Address | aiting Address | | | |
|--|---------------------------------------|---------------------------|---------------------------|---------------------|----------|--|
| 413-E ALAFA | YA WOODS BLVD. | 413-E ALAFAYA WOO | 413-E ALAFAYA WOODS BLVD. | | | |
| OVIEDO FL 32785-5509 | | OVIEDO FL 32765-5509 | | | | DO NOT WRITE IN THIS SPACE |
| US | | US | US | | | 3. Date Incorporated or Qualified |
| | | | | | | 07/08/1996 |
| 2. Principal Pi | ace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number Applied For |
| 21 | | 26 | | | | 59-3387132 Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | S8 75 Additional |
| 22 | | 27 | 7 | | | 5. Certificate of Status Desired Fee Required |
| City & State | 9 | City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be |
| 23 | 28 | | | | | Trust Fund Contribution |
| Zip | Country | Zφ | — | ıntry | | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 Pogletered Acopt | 30 | т | | Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent |
| 9, Name and Address of Current Registered Agent | | | | | Name | 10, Hame and Address of New Registered Agent |
| MUNROE, MURDOCK | | | | | | |
| | 01 WILKOW DR. #103 ILANDO FL 32821 | | 82 Street | | Street A | Address (P.O. Box Number is Not Acceptable) |
| On. | DANDO PL 32021 | | 83 | | | |
| | | | | | | |
| | | | | 84 | City | FL 85 Zip Code |
| 11. Pursuant t | o the provisions of Sections 607.0502 | and 607.1508. Florida Sta | tutes, the a | ll. bove-r | named c | 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505. Florida Statutes. | | | | | | |
| • | | | | | | |
| SIGNATURE Signature, typed or printed name of registered agest and title if applicable (NO1). Registered Agent signature required when renstating) OATE | | | | | | |
| 12. | OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | Đ | ☐ DELETE | DELETE 111 | | | ☐ Change ☐ Addition |
| NAME MUNROE, MURDOCK | | _ | 1 2 NAME | | | |
| STREET ADDRESS 413-E ALAFAYA WOODS BLVD | |). | 1 3 STREET ADDRESS | | IDRESS | |
| CITY-ST-ZIP | OVIEDO FL | | 1.4 (| | ZIP | |
| TITLE | D | ☐ DELETE | ☐ DELETE 217 | | | L] Change L] Addition |
| NAME] | MUNROE, CLEIDE C | | 2 2 N | | | |
| STREET ADDRESS | 413-E ALAFAYA WOODS BLVI |). | 2.3 \$ | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | OVIEDO FL | PELETE | | ITY-ST- | ZIP | VICE PRESIDENT |
| TITLE | | ☐ DELETE | 3 1 TI | | | FABIO MUNROE Change Addition |
| NAME | | | 3.2 N | | | 413-E Alalana uroxcha Alice |
| STREET ADDRESS | | | - 1 | TREET AD | ODRESS | VICE PRESIDENT FABIO MUNROE Change Maddition 413-E Alajaya woods Blvd Oviedo, FL. 32765 |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. C | ITY-ST- | Z(I)' | Change Addition |
| NAME | | pactit | 4.13 | | | Li Crimigo Li Rounion |
| STREET ADDRESS | | | 1 | ianic Treet ad | inecco | |
| CITY-ST-ZIP | | | | ITY-SI-Z | | |
| TITLE | | ☐ DELETE | 5.1 Ti | | L'' | Change Addition |
| NAME | | | 5.2 N | | | |
| STREET ADDRESS | | | | TREET AD | DRESS | |
| City-St-Zip | | | | TY-\$T-2 | | İ |
| TITLE | | DELETE | 6.1 70 | | - | ☐ Change ☐ Addition |
| NAME | | <u> </u> | 6.2 N | | | |
| STREET ADDRESS | | | | TREET AD | DRESS | |
| CITY-ST-ZIP | | | | 6.4 CITY - ST - ZIP | | |
| I d | | | 0.7 0 | ., 0, 2 | · | |

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 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 trusted 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.

407-359-3515 Home