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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000068006 (1)										
M. O. INTERNATIONAL TRADING INC.										
Principal Place of Business Mailing Address										F JEGETOBE JID NOVER DEVIK OGDIN BODEN BONN BONN DAVIN ON HE I DAVI BONN OR HA BUN 1661
	9898 SW 881 Miami fl 331	TH \$T #C-20 176	é	9898 SW 88TH ST #C-202 MIAMI FL 33176						
										DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
										08/13/1996
<u> </u>	2. Principal Place of Business				2a. Mailing Address					4. FEI Number Applied For
21	21 Suite, Apt. #, etc.			26	Suite, Apt. #, etc.					65-0754077 Not Applicable \$8.75 Additional
22				27	27					5. Certificate of Status Desired Fee Required
	City & State			28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	Zip	Country			Zip Country					Trust Fund Contribution LJ Added to Fees 8. This corporation owes or has paid the current year Intangible
24	`	25 29 30							Personal Property Tax due June 30. 🔲 Yes 🔲 No	
-			and Address of Curren	t Regis	tered Agent		81	Nan		10. Name and Address of New Registered Agent
OCAMPO, MIGUEL 9898 SW 88TH ST #C-202								<u> </u>		
MIAMI FL 33176				82 Stree			Stre	et Addr	iress (P.O. Box Number is Not Acceptable)	
****					83					
					84 City			City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607,0693 and 607,1508, Florida Statutes, the a office or regilate for many of buy in the provisions.							above	e-nam	ed corp	poration submits this statement for the purpose of changing its registered
office or registered to the first of the process of the same authorized by the agent. I amush vive (viv. anti at April) of the process of pection 607.0505, Florida Statutes.								/ the c s.	orporati	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
Si	GNATURE	TXXXT	Lor printed name of registered age		/ if applicable (NO	TE Florist	ared Age		tuo rooviro	irod when reinstating) DATE
12	. <u>. </u>	organical type	OFFICERS AND			1:		an pyria	idio regore	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIT	!	D			DELETE		TITLE			Change Addition
	AME OCAMPO, MIGUEL TREET ADDRESS 9898 SW 88TH ST #				1.2 NAME 1.3 STREET A		Annes			
"	Y-\$T-ZIP		FL 33176				CITY-S		"	
TIT					☐ DELETE		TİTLE			Change Addition
NA	. 1						NAME		.	
i	REET ADDRESS Y-ST-ZIP					1	STREET 4 CITY-5		S	
TIT					☐ DELETE		TITLE	V. 2.		☐ Change ☐ Addition
NA						•	NAME			
1	REET ADDRESS					1	STREET		is	
CITY-ST-ZIP TITLE			···-·	DELETE 4.1 TO			ST-ZIP		☐ Change ☐ Addition	
NA	ME .					. 4.	2 NAME		-	
ı	REET ADDRESS						STREET		is	
CIT	Y-ST-ZIP				DELETE		CITY-S	T - ZIP		☐ Change ☐ Addition
NA	I						NAME			
STF	REET ADDRESS					5.3	STREET	ADDRES	is [
	Y-\$T-ZIP				DELETE		CITY-S	T-ZIP		☐ Change ☐ Addition
TIT!					☐ otteit		NAME			☐ Change ☐ Addition
ł	HEET ADDRESS						STREET	ADDRES	s	
I									- 1	

4. 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 supplicemental annual report is report and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the comparation or the construction or the construction of the construction

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4.28.98

FILED

May 11 1998 8:00am

Secretary of State