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

PROFIT
CORPORATION*
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Santra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

May 29 1997 8:00am Secretary of State

FILED

000081543

MAUIS SHIPPING & TRADING CORP.

INTIV	13 311111111111111111111111111111111111	TICHOTTO COT	• •			l
Principal Place	e of Business	Mailing Address				,
241 SEVILLA AVE. STE. 1005 CORAL GABLES FL 33134 US		241 SEVILLA AVE. STE. 1005 CORAL GABLES FL 33134-6619 US			3, Date incorporated or Qualified 3a. Date of Last Report	
.2. Principal Pi	lace of Business	2a. Mailing Address			10/03/96 4. FEI Number Applied Fo	r
21		26			65-0710972 Not Applica	
Sulto, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Seguired Fee Regulred	Į.
City & State	3	City & Stato			6. Efection Campaign Financing \$5.00 May Be	
23	.	28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032	≥,
24	9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes	
Pr	NALD PRUPIS		8	1 Nan	Name	
241 SEVILLA AVE.			ā	2 Stre	Street Address (P.O. Box Number is Not Acceptable)	
	1005		L			
COR	VAL GABLES FL 33134		8	13		
	•		8	14 City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 807.05	22 and 607,1508, Florida Statu	tes, the abo	ve-nam		rec
office or re agent. I a	egistered agent, or both, in the Sidi m familiar with, and acceptance obli	ie of Florida. Such change was gallons of, Section 607.0505, Fl	authorized Iorida Statut	by the c les.	amed corporation submits this statement for the purpose of changing its registe the corporation's board of directors. I hereby accept the appointment as registers	ad
SIGNATURE	- ANAM					
	Signature, typodal printed name of registored a	good and title of applicable. (NO ND DIRECTORS	TE: Registered /	Agont signa	igniture required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	≯ 7⊕	DELETE	1.1 T(TL)	E	Change Add	iitio
NAME	RONALD PRUPIS		1.2 NAM	IE		
STREET ADDRESS	241 SEVILLA AVE.		1.3 STRE	EET ADORES	DRESS	
City-ST-ZIP	CORAL GABLES FL	. DELETE		-ST-ZIP	II Chanbe Add	dille
TITLE NAME	F. DANIEL SAFFE	, DELEGE	2.1 TifL 2.2 NAM		L. Change L. M.X	шк
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NAME			4, 2 NA			
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CITY-ST-ZIP		I DOCUME	~~ ~	-S1-21P	Copange Adv	e e
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STREET ADDRESS				ne Cet addre:	ores / 1/5/10/9-	`
CITY-ST-ZIP			1	r-st-zip		_
TITLE		☐ DELETE	6,1 1111		100002204861 Change Add	dili
NAME			6.2 NAN		-06/06/9701117026	
STREET ADDRESS			•	EET ADDRES	^{URSS} ***165.00	
CITY-ST-ZIP	by certify that the information suppl	iod with this filing does not qua		r-ST-ZIP Exemptio	otion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	_

4. 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 eath; if I am an officer or director of the corporation profits 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 in fanning for on an attachment with an address.