**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## May 17, 1999 8:00 am Secretary of State

05-17-1999 90069 046 \*\*\*150.00

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## DOCUMENT # P96000083302

1. Corporation Name

SUPRE STOCK COMMERCIAL IMPORT & EXPORT CO.

Principal Place of Business Mailing Address					I (BBISER HE INIA ANN) ABIN ABIN BEST INIA COME COME INTO CORE AND ACT.
14511 SW 146 PLACE 14511 SW 146 PL					
MIAMI FL 33186 MIAMI FL 33186				DO NOT MOTE IN THE SPACE	
US US					DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed
					10/04/1996
• D-111 D	- Consistence	2a. Mailing Address			4. FEI Number Applied For
⊢ lise	lace of Business	HI ILION ANAL	67	ST	65-0704551 Not Applicable
Suite, Apt.	<u> </u>	26 1115 M NVV Suite, Apt. #, etc.	<del>•</del> ,		\$8.75 Additional
22	#, etc.	27			5. Certificate of Status Desired Fee Required
City & State	9	City & State	7	orida	6. Election Campaign Financing \$5.00 May Be
23 MIP		28 MIAMI -	•		
Zip	Country	Zip	Country	CIA	8. This corporation owes the current year Intangible
24 331		29 33178 30	<u> </u>	SA	Personal Property Tax. Yes No
	<ol><li>Name and Address of Current</li></ol>	Registered Agent			10. Name and Address of New Registered Agent
SADIO COSTALO DE COMO A CANTOO					
FABIO COELHO DE SOUSA SANTOS				Street	t Address (P.O. Box Number is Not Acceptable)
11154 NW 67 ST					
MIAMI FL 33178				1	
			84	City	85 Zip Code
					FL   S   2F   COCC
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 ryped growther harrie or begistered agent and title if apericable. (NOTE: Registered Agent signature required when re-					e required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	, 🗷 DELETE	1.1 TITLE		D
NAME	COELHO DE SOUSA SANTOS,	FABIO	1.2 NAME		LUELHO DE SOUSA SANTOS, FABIO
STREET ADDRESS	AND DEPLOY 144 CALLES OF ACCAMOUNT		1.3 STREE	TADDRESS	
CITY-ST-ZIP SALVADOR, BA, BRAZIL 41920-000		1.4 CITY-5	ST-ZIP	MIAMI - FLORIDA - 33178	
TITLE		□DELETE	2.1 TITLE		D Change Addition
NAME			2.2 NAME		VICTOR SILVA
STREET ADDRESS	<u> </u>		2.3 STREE	TADDRESS	s 11154 NW 675+
CITY-ST-ZIP		. 9	2. 4 CITY-		MIAMI - FLONIDA - 33178
TITLE	<del></del>	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS				T ADDRESS	s
CITY-ST-ZIP			3.4. CITY-		
TITLE		☐ OELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS				T ADDRESS	s
CITY-ST-7IP			4.4 CITY-5		

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, with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

☐ DELETE

☐ DELETE

Change

Change

Addition

Addition