1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90010 049 \*\*\*150.00

## DOCUMENT # P96000088527

GERGOSAN TRADING INTERNATIONAL, INC.

Principal Place 17800 W DIXIE SUITE C N MIAMI BCH I US	HWY	Mailing Address 17800 W DIXIE HWY SUITE C N MIAMI BCH FL 33160 US		DO NOT WRITE IN THE  3. Date Incorporated or Qualifed  10/28/1996		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Ap	plied For
21 /7800	W. Dirie Hay	26 1+800 W. J.	ixie Hwy	65-07 10850	No	t Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc. 27 SUITE C		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	ui, tl	City & State	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip 33/	Gountry Country Country Country	zip 3 / 60 3	Country SA	This corporation owes the current year I     Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registere	d Agent	
1500	INS, RICHARD D NW 107H AVE STE 200 MI FL 33172			ddress (P.O. Box Number is Not Acceptable)	<b>L</b> 85 Zip 0	Code
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State c rm familiar with, and accept the obligati Signature, typed or printed name of registered agent	of Florida. Such change was aut ons of, Section 607.0505, Florid	horized by the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the appulation of the purpose ation's board of directors. I hereby accept the appulation of the purpose ation's board of directors.	ointment as reg	jistered
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	
TITLE	PD	☐ DELETE	1.1 TITLE		Change	☐ Addition
NAME	GOMEZ, GERMAN E		1.2 NAME			
STREET ADDRESS	17800 W DIXIE HWY, SUITE C		1.3 STREET ADDRESS			
CITY-ST-ZIP	N MIAMI BCH FL		1.4 CITY-ST-ZIP			
TITLE	SD CERMAN 5	☐ DELETE	2.1 TITLE		☐ Change	Addition
NAME	GOMEZ, GERMAN E		2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP	N MIAMI BCH FL	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change	☐ Addition
TITLE			3.2 NAME			
NAME STREET ADDRESS			3.3 STREET ADDRESS			
			3.4. CITY-ST-ZIP			
CITY-ST-ZIP		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		_	
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS	tan e		
CITY-ST-ZIP	1		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS	}		6.3 STREET ADDRESS			
   CITY-ST-ZIP			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 suppliemental arrival 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 impowered 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 a valid other like empowered.

SIGNATURE: