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

PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT# D

1. Corporation Name NEP TRADING, CORP.									
Principal Place of Business	Mailing Address				i i deichan ern intil diet mitt mutt batin tilli)	91		
181 N.W. 97TH AVE. #116 MIAMI FL 33172	181 N.W. 97TH AVE. #116 MIAMI FL 33172				DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed		Ī		
	· · · · · · · · · · · · · · · · · · ·				12/13/1996				
2. Principal Place of Business	2a. Mailing Address				4. FEI Number				
21	26	. =			65-0715768				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8. Fe			
City & State	City & State				- 6,- Election Campaign Financing	- \$5			
23	28				Trust Fund Contribution	Ad			
Zip Country	Zip	Zip Country 29 30			8. This corporation owes the current year Intangible Personal Property Tax.				
24 25	3								
9. Name and Address of Co					10. Name and Address of New Registered	Agent			
	ALCOHOLD STR	81	1	Name					
URBANO, CRUZ E 9581 FONTAINBLEAU BLVD. ST. 316		82	2 5	Street Addre	ess (P.O. Box Number is Not Acceptable)		_		
MIAMI FL 33172		83							
and the second of the second o		84		City	FL	85	7		
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent. I am familiar with, and accept the o	tate of Florida. Such change was auth	horized by	/ the	amed corpo corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	changir stment	n(
SIGNATURE							_		
Signature, typed or printed name of registers	of agent and title if applicable. (NOTE: Re		nt sig	nature required	when reinstating): 334 DATE		_		
TITLE D OFFICERS	DELETE	13.		$\neg au$	ADDITIONS/CHANGES TO OFFICERS AN	D DIRE			

FILED Jan 22, 1999 8:00am Secretary of State 01-22-1999 90057 046 ***150.00

2. Principal P	al Place of Business 2a. Mailing Address					4. FEI Number			Applied For	
21	# · · · · · · · · · · · · · · · · · · ·	26				65-07.15768			lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.						\$8.75	Additional	
22		27				5. Certificate of Status Desired		Fee F	Required	
City & Stat	θ	City & State	:			- 6 - Election Campaign Financin	9	\$5.0	May Be	
23		28				Trust Fund Contribution	ັ ⊔		to Fees	
Zip	Country	Zip	Countr	<u>у</u>		8. This corporation owes the co	urrent vear Intar	ngible		
24 25 29 30			30			Personal Property Tax.	•	Yes	□No	
	9. Name and Address of Current I	Registered Agent				10. Name and Address of Nev	v Registered A	gent		
		HIP STATE	81	I N	ame					
URBANO, CRUZ E			82	1 0	*===* A-l-l	(D.O. Boy Number is Not Asso	nachle)			
9581 FONTAINBLEAU BLVD. ST. 316			64	د ا	neer Addres	ss (P.O. Box Number is Not Acce	ptable)			
MIAMI FL 33172			83	3			5.1 Fig			
				L				100		
			84	C	ity '	entre en la marchini de April	FI	85 Zip	Code	
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 r	egistered agent, or both, in the State of	Florida. Such change was aut	thorized by	/ the	corporation	's board of directors. I hereby acc	cept the appoint	ment as i	egistered	
agent. I a	m familiar with, and accept the obligatio	ns of, Section 607.0505, Florid	da Statute:	S.		:				
SIGNATURE	Classical distribution of the control of the contro	ACT S					DATE			
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	ric sign	sature required w	hen reinstating); ***;		DIDECT	ODS IN 12	
TITLE	P	□ DELETE	1.1 TTLE			ADDITIONS/CHANGES TO C		Change		
NAME	URBANO, CRUZ E		1.2 NAME			MARTINE.				
		TE 010								
STREET ADDRESS			1.3 STREE							
CITY-ST-ZIP	MIAMI FL 33172	☐ DELETE	1.4 CITY-5	ST-ZIP	<u> </u>			Channe	☐ A dulition	
TITLE	V	□ DETE45	2.1 TITLE			•		[] Change	☐ Addition	
NAME	ALVAREZ, NELLINA D		2.2 NAME							
STREET ADDRESS			2.3 STREE	T ADD	RESS				•	
CITY-ST-ZIP	MIAMI FL 33172		2, 4 CITY-	ST-ZIF	·					
-TITLE	5 5	DELETE	3.1 TITLE		·			Change	Addition	
NAME	ALVAREZ, AUGUSTIN	,	3.2 NAME							
STREET ADDRESS	URB, SANTA EDUVIGIS #51 2A (CALLE CAGUA	3.3 STREE	T ADD	RESS			4, 4	, gen 189	
CITY-ST-ZIP	ESTADO ARAGUA		3.4. CITY-	ST-ZIF	,					
TITLE	T ·	☐ DELETE	4.1 TITLE					Change	Addition	
NAME	URBANO, JESUS A	•	4. 2 NAME	:						
STREET ADDRESS		CTOR MAMERA #25	4.3 STREE	T ADD	RESS				į	
CITY-ST-ZIP	ANTIMANO, CARACAS		4.4 CITY-S	ST-ZIP					1	
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition	
NAME			5.2 NAME					-	Ì	
STREET ADDRESS			5.3 STREE	T ADD	RESS					
CITY-ST-ZIP	P		5.4 CITY- S	ST-ZIP		, x * * .				
TITLE	प्रदेशकार । एक ।	☐ DELETE	6.1 TITLE					Change	Addition	
NAME	1950: Danie (APO 1,000 Apo 1		6.2 NAME				'		_	
STREET ADDRESS	August State of the Control of the C		6.3 STREE	T ADDI	RESS				ĺ	
1	V		6.4 CITY-S							
CITY-ST-ZIP	ertify that the information supplied with	ble filing door not qualify for the				ti 110 07/3/i) Florida Ctat 1	. I fi what as the		information	

indicated on this annual report or supplied with ris 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 entain attachment with an address; with all other like empowered.

SIGNATURE

226-6046.

CR2E034 (11/98)