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 # P96000101354

1. Corporation Name

TECHNOTRADE USA, INC.

Principal		

Mailing Address

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90212 015 ***150.00



10361 SOUTHW MIAMI FL 33190	HWEST 150 COURT. SUITE 13105 10361 SOUTHWEST 150 COURT. SUITE 13105 1196 MIAMI FL 33196		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 01/01/1997		
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Applie	ed For
21 148/6	SW 104 STREET	26 14816 SW 10	4 STLEE	7 65-0725330		pplicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	U	5. Certificate of Status Desired	\$8.75 Add Fee Requi	
City & Stat	AM;	City & State . Mi AMi		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Ma Added to F	•
Zip 24 33 1	96 [25] US A	29 33196 30	USA	This corporation owes the current year Personal Property Tax.	☐ Yes	ÍΝο
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	red Agent	
CDEI	TAC EDCON		81 Name	EDSON FREITA	S	{
FREITAS, EDSON 10361 SW 150 COURT			82 Street Ac	Idress (P.O. Box Number is Not Acceptable)		
	Al FL 33196		83	16 SW 104 ST #8	6	
INITAL	M 7 L 33130	•	03			j
			84 City	1: mai	FL 85 Zip Coo	96
44 Dureuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes, the	e above-named co	progration submits this statement for the purpos	e of changing its red	gistered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was authori	zea by the corpora	ation's board of directors. I hereby accept the a	ppointment as regis	tered
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: Registr	ered Agent signature requ	uired when reinstating) DATI	E	
12.	OFFICERS AND	DIRECTORS 1	3.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PSTD	☐ DELETE 1.	1 TITLE		Change	Addition
NAME	FREITAS, EDSON		2 NAME	ware a brad and and	a de ser de	cr
STREET ADDRESS	10361 SOUTHWEST 150 COURT	, SUITE 13105	3 STREET ADDRESS	4816 SW 104 STREET	3/1/16	•
CITY-ST-ZIP	MIAMI FL 33196		4 CITY-ST-ZIP	miami, FL. 3319	·	- Addition
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STREET ADDRESS						
CITY-ST-ZIP			4 CITY-ST-ZIP		Change	Addition
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NAME			3 STREET ADDRESS			į
STREET ADDRESS		•	4 CITY-ST-ZIP			ļ
CITY-ST-ZIP TITLE			1 TITLE		☐ Change	Addition
NAME	ļ		2 NAME		- •	-
STREET ADDRESS	·.	6	3 STREET ADDRESS			ł

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 an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP