

5-4-98 4-6372-C
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May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000008447 (9)

1. Corporation Name

ARES TRADING CORPORATION

Principal Place of Business

314 NW 22ND AVENUE
MIAMI FL 33135

Mailing Address

314 NW 22ND AVENUE
MIAMI FL 33135



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/28/1997

4. FEI Number

65-0723410-031712

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 591 N.W. 27 St

26 591 N.W. 27 St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI, FL

28 MIAMI, FL

24 Zip

Country

29 Zip

Country

25 DADE

30 DADE

9. Name and Address of Current Registered Agent

BRUNI, MARK C
150 SE 2ND AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

SOFIA I. CAPALDO

82 Street Address (P.O. Box Number is Not Acceptable)

723 N.W. 129 CT

83 City

MIAMI

84 State

FL

85 Zip Code

33182

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

Sofia I. Capaldo

SOFIA I. CAPALDO Pres. 4/24/98

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE

D
NAME
BRUNI, MARK C
STREET ADDRESS
150 SE 2ND AVENUE
CITY-ST-ZIP
MIAMI FL 33131

1.1 TITLE ☐ Change ☒ Addition

P.D.
1.2 NAME
SOFIA CAPALDO
1.3 STREET ADDRESS
723 N.W. 129 CT
1.4 CITY-ST-ZIP
MIAMI, FL. 33182

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

S.D.V.P.
2.2 NAME
ROBERTO DiCAMPLI
2.3 STREET ADDRESS
713 N.W. 129 CT.
2.4 CITY-ST-ZIP
MIAMI, FL. 33182

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

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 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.

SIGNATURE:

Sofia Capaldo

SOFIA CAPALDO 4/23/98 (305) 438-1799

CR2E034 (10/97)