

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

FILED
Feb 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000016099 (8)**

1. Corporation Name

BLUE SKY TRADING OVERSEAS, INC.



Principal Place of Business

Mailing Address

**1515 E. BROWARD BLVD., #205
FORT LAUDERDALE FL 33301**

**1515 E. BROWARD BLVD., #205
FORT LAUDERDALE FL 33301**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/17/1997

2. Principal Place of Business

21 1515 E. BROWARD BLVD

2a. Mailing Address

26 1515 E. BROWARD BLVD

Suite, Apt. #, etc.

22 218

Suite, Apt. #, etc.

27 218

City & State

23 FORT LAUDERDALE, FL

City & State

28 FORT LAUDERDALE, FL

Zip

24 33301

Country

25 USA

Zip

29 33301

Country

30 USA

4. FEI Number

65-0736179

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

9. Name and Address of Current Registered Agent

**CASTRO, DAVID
1515 E. BROWARD BLVD., #205
FORT LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent

81 Name CASTRO, DAVID

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

1515 E. BROWARD BLVD # 218

83

84

CITY FORT LAUDERDALE

FL

85 Zip Code 33301

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JESUS MEJIAS I	1.2 NAME	
STREET ADDRESS	1515 E. BROWARD BLVD # 218	1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301	1.4 CITY-ST-ZIP	
TITLE	VICE - PRESIDENT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID CASTRO	2.2 NAME	
STREET ADDRESS	5100 N. OCEAN BLVD # 1602	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308	2.4 CITY-ST-ZIP	
TITLE	SECRETARY <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID CASTRO	3.2 NAME	
STREET ADDRESS	5100 N. OCEAN BLVD # 1602	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE BY THE SEA, FL 33308	3.4 CITY-ST-ZIP	
TITLE	TREASURER <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JESUS MEJIAS	4.2 NAME	
STREET ADDRESS	1515 E. BROWARD BLVD # 218	4.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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

[Signature]

01/20/98 (REV) 7121738

CR2E034 (10/97)