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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P97000020037 (2)

LOGOS TECHNICAL TRADING AND CONSULTING, INC.

Principal Place of Business Mailing Address 8004 NW 154TH ST 8004 NW 154TH ST SUITE 103 **SUITE 103** MIAMI LAKES FL 33016-5835 MIAM! LAKES FL 33016-5835

FILED Jan 15 1998 8:00am Secretary of State



1997

(305) 5i2.3648

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/28/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-073-3609 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Ζip 8. This corporation owes or has paid the current year Intangible 29 24 25 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GOMEZ, RAFAEL J 8004 NW 154TH ST 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 103 83 MIAMI LAKES FL 33016-5835 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1.1 TITLE Change GOMEZ, RAFAEL J 1.2 NAME 15530 NW 83RD CT STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL 33016-5835 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY-51-ZIP DELETE ___ Change ___ Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change ___ Addition TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 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 of trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation of Block 12 or Block 13 if changed officer

JUIRED