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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000021946 (3)

ARCANGEL TRADING CORPORATION

Principal Place of Business

SIGNATI IRF.

Mailing Address

FILED Mar 20 1998 8:00am Secretary of State



3/9/98

6078 NORTH WATERWAY DRIVE 6078 NORTH WATERW MIAMI FL 33155 MIAMI FL 33155			PRIVE			
MINMITE 99139 MINMITE 99139				DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified		
				03/05/1997		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 9601	FOUNTSING BLEAU BLUD	26 9601 FOUNTON	esuau sivà	65-0733235	Not Applicable	
Suite, Apt.	•	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
		27 210		6. Certificate of Status Desireo	Fee Required	
City & Stat			44 8 49	6. Election Campaign Financing	\$5.00 May Be	
23 MIAM		120	· · · · · · · · · · · · · · · · · · ·	Trust Fund Contribution	Added to Fees	
Zip 24 33/7	Country	Zip 29 35/72 30	Country	8. This corporation owes or has paid the cu	' ' i	
24 33/7		120 100	01	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No	
GUERNERO, ANGEL A						
6078 NORTH WATERWAY DRIVE				Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33155						
			83		İ	
			84 City	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 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. Ham 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.	Signature, typed or printed name of registered agent OFFICERS AND		egislered Agent algneture require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	PRESIDENT	DELETE	1.1 TITLE	ADDITIONS/OF ANGES TO OF TOLING AN	Change Addition	
NAME	A SAME CINCAROL	, —	1.2 NAME		C CHANGE C PROGRESSI	
	9601 FOUNTAINCALL	W BLUD #210				
STREET ADDRESS	MIANI FLORIDA	カシノフフ	1.3 STREET ADDRESS		1	
CITY-ST-ZIP TITLE	HINNY FLUCION	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition	
NAME			22 NAME		C change C voulion	
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		☐ DELETE	2 4 CITY-ST-ZIP 3.1 TITLE		Change Addition	
NAME		Z been	3.2 NAME		C country	
			1			
STREET ADORESS			3.3 STREET ADDRESS			
CATY-ST-ZIP TITLE		DELETÉ	3.4. CITY-ST-ZIP 4.1 TITLE	·	Change Addition	
		C DECEIL	4.7 TITLE 4.2 NAME			
NAME					j	
STREET ADDRESS			4.3 STREET ADDRESS		1	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition	
					T CHANGE K MONITOR	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		3,701	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		Change Addition	
TITLE		La privite	6.1 TITLE	2000024631		
NAME CYPECT ADDRESS			6.2 NAME	2000024631 -03/20/98010260	19	
STREET ADDRESS		1	6.3 STREET ADDRESS	***150.00		
CITY-ST-ZIP	partify that the information ationlied with	this filing does not qualify for t	6.4 CITY-ST-ZIP	Section 119 07(3Vi) Florida Statutas I furbar a	ertify that the Information	
14. I hereby certify that the information supplied with this filling 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 of 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 ecciver of restorated accorded 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.						