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FILED
Apr 02 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # P97000024535 (1)

1. Corporation Name

ALRTECH TRADING, CORP

Principal Place of Business

Mailing Address

15330 SW 106 TERRACE
SUITE 913
MIAMI FL 33196

15330 SW 106 TERRACE
SUITE 913
MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1997

4. FEI Number

65-0734895

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

21 10425 SW 153 CT

Suite, Apt. #, etc.

22 #1

City & State

23 33196 MIAMI - FL

Zip

24 33196

Country

25 E.E.U.

2a. Mailing Address

26 10425 SW 153 CT

Suite, Apt. #, etc.

27 SUITE #1

City & State

28 MIAMI - FL

Zip

29 33196

Country

30 E.E.U.

9. Name and Address of Current Registered Agent

ALARCON, OSCAR
15330 SW 106 TERRACE
SUITE 913
MIAMI FL 33196

PLEASE NOTE
NEW ADDRESSES.

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

OSCAR ALARCON

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ALARCON, OSCAR
STREET ADDRESS 15330 SW 106 TERRACE
CITY-ST-ZIP MIAMI FL 33196

TITLE SO ☐ DELETE

NAME ALARCON, MIGUEL
STREET ADDRESS 15330 SW 106 TERRACE
CITY-ST-ZIP MIAMI FL 33196

TITLE TD ☐ DELETE

NAME ALARCON, OSCAR
STREET ADDRESS 15330 SW 106 TERRACE
CITY-ST-ZIP MIAMI FL 33196

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☐ Addition

1.2 NAME OSCAR ALARCON
1.3 STREET ADDRESS 10425 SW 153 CT #1
1.4 CITY-ST-ZIP MIAMI FL 33196

2.1 TITLE SO ☐ Change ☐ Addition

2.2 NAME ALARCON MIGUEL
2.3 STREET ADDRESS 10425 SW 153 CT #1
2.4 CITY-ST-ZIP MIAMI - FL 33196

3.1 TITLE TD ☐ Change ☐ Addition

3.2 NAME ALARCON OSCAR I
3.3 STREET ADDRESS 10425 SW 153 CT #1
3.4 CITY-ST-ZIP MIAMI - FL 33196

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 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:

OSCAR ALARCON

FEB. 15 - 1998

(305) 752 9108

CR2E034 (10/97)