

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF REVENUE  
DIVISION OF CORPORATIONS

FILED

00 JUL 26 AM 10:10

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT# P97000027241

Corporation Name

QUANTA INTERNATIONAL TRADING, INC

Mailing Address

Principal Place of Business

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

New Mailing Address, If Applicable

5350 NW 114 AVE

3. New Principal Office Address, If Applicable

5350 NW 114 AVE

Suite, Apt. #, etc.  
# 303

Suite, Apt. #, etc.  
# 303

City & State  
MIAMI - FL

City & State  
MIAMI - FL

Country  
USA

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

65-0736940

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| 1. Title(s) | 2. Name of Officers and/or Directors | 3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4. City - State - Zip   |
|-------------|--------------------------------------|--|---|
| S.D.        | GAIA, SEBASTIAO A.                   | 5350 NW 114 AV. #303   | MIAMI - FL 33178  |
| P.D.        | BARONI, ALEXANDRE                    | 5350 NW 114 AV. #303   | MIAMI - FL 33178  |
|             |                                      |  | 800003349368--7<br>-08/08/00--01064--015<br>****300.00 ****300.00 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

GAIA, SEBASTIAO A.

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

5350 NW 114 AV

Suite, Apt. #, Etc.

# 303

City

MIAMI

State

FL

Zip Code

33178

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

Sebastiao Gaia

REGISTERED AGENT MUST SIGN

Date 07-20-00

1. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information)

2. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐ (See other side for information on intangible tax.)

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Sebastiao Gaia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07-20-00

Date

305-463-9883

Daytime Phone #