

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 07, 1999 8:00 am
Secretary of State

09-07-1999 90007 043 ***550.00

DOCUMENT # **P97000044947**

Corporation Name

BECERRA TRADING COMPANY



Principal Place of Business

**HAMPTON DR NE
PALM BAY FL 32905**

Mailing Address

**669 HAMPTON DR NE
PALM BAY FL 32905**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1997

Principal Place of Business

932 E. NEW HAVEN AVE

2a. Mailing Address

932 E. NEW HAVEN AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MELBOURNE, FL

City & State

MELBOURNE, FL

Zip

32901

Country

BREVARD

Zip

32901

Country

BREVARD

4. FEI Number

59-3449565

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 the current year
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BECERRA, ROBERT F
669 HAMPTON DR NE
PALM BAY FL 32905**

10. Name and Address of New Registered Agent

81 Name

BECERRA, ROBERT F.

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

668 HAMPTON DR. N.E.

83

84 City

PALM BAY

FL

85 Zip Code

32905

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

ROBERT F. BECERRA / PRESIDENT *Robert F. Becerra* **8/31/99**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

☐ DELETE
D
BECERRA, ROBERT F
669 HAMPTON DR NE
PALM BAY FL 32905

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BECERRA, ROBERT F
669 HAMPTON DR NE
PALM BAY FL 32905

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BECERRA, ROBERT F
669 HAMPTON DR NE
PALM BAY FL 32905

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P PRESIDENT
BECERRA, ROBERT F.
668 HAMPTON DR NE
PALM BAY, FL. 32905

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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: **ROBERT F. BECERRA / PRESIDENT** *Robert F. Becerra* **8/31/99** **953-8899**

CR2E034 (5/99)