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

**FILED** Jul 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra <del>D. 165;th</del>sm , ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS **1998** DOCUMENT # P97000067974 (0) TRADERS GROUP, INC. Principal Place of Business Mailing Address 2600 S.W. 3RD AVE. 2600 S.W. 3RD AVE. MIAMI FL 33129 MIAMI FL 33129 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/04/1997 **≰**Applied For 2. Principal Place of Business 2a. Mailing Address 2600 Sw 34 Av 26 Not Applicable Suite, Apt. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Country Country B. This corporation owes or has paid the current year intangible 2446 Yes 24 25 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DE **RIB**EAUX, GUS NELDON R. REYNERI 2903 SALZEDO ST. Street Address (P.O. Box Number is Not Acceptable) 82 CORAL GABLES FL 33134 В3 64 City 85 Zip Code 33449 MIAM 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation subjects 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 pharm oddirectors. Thereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, typed or printed haroe of registered agent and title if applicable (NOTL Registered Agent signature OFFICERS AND DIRECTORS S/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 1 1 TITLE FERNANDEZ, LUIS M NAME 1.2 NAME CR2E034 2600 S.W. 3RD AVE. STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TiTL€ OBESO, JOSE 2.2 NAME 2600 S.W. 3RD AVE. STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33129 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - ST- ZIP CITY-ST-ZIP

\*\*\*150.00 CITY-ST-ZIP 14. Thereby 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 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 of 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 from an attachment with an address.

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

**5.3 STREET ADDRESS** 

6.3 STREET ADDRESS

5.4 CHTY - S1 - ZIP

DELETE

DELETE

SIGNATUREZ

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

900002588889

-07/14/98--01093--003

Change

Change

Addition