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**May 19 1998 8:00am  
Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1998**



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

**DOCUMENT # P97000078532 (3)**

1. Corporation Name  
**AIR & SEA TRADERS, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**5830 NW 111 AVENUE  
MIAMI FL 33178**

Mailing Address  
**5830 NW 111 AVENUE  
MIAMI FL 33178**

3. Date Incorporated or Qualified

**09/10/1997**

2. Principal Place of Business  
21 **7676 nw 186 street**

2a. Mailing Address  
26 **7676 nw 186 street.**

4. FEI Number  
**65-0780180**

Applied For  
Not Applicable

Suite, Apt. #, etc.  
22 **+210.**

Suite, Apt. #, etc.  
27 **#210.**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

City & State  
23 **miami, florida.**

City & State  
28 **miami, florida.**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

Zip Country  
24 **33143 U.S.A.**

Zip Country  
29 **33015 U.S.A.**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**URIBE, ASTRID  
4995 N.W. 72 AVE.  
SUITE #201  
MIAMI FL 33166**

10. Name and Address of New Registered Agent

81 Name **Uribe, Astrid.**

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

83 **FL**

84 City

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 607.0505, Florida Statutes.

SIGNATURE **Astrid E. Uribe**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**4-28-98.**

12. OFFICERS AND DIRECTORS

TITLE **PD**  DELETE  
NAME **URIBE, ASTRID**  
STREET ADDRESS **5830 N.W. 111 AVE.**  
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **SD**  DELETE  
NAME **AYALA, JORGE M**  
STREET ADDRESS **5830 N.W. 111 AVE.**  
CITY-ST-ZIP **MIAMI FL 33166**

TITLE  DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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: **Astrid E. Uribe**

**4/28/98**

**(305) 904 9881**

CR2E034 (10/97)