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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris 🦳

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P970000 91673 1. Corporation Name

STRATEGIC TRADE ALLIANCE, INC.

Principal Place of Business

Mailing Address

2103 NW 79AV.

2103 NW 79 AV.

DO NOT WRITE IN THIS SPACE

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90173 037 ***150.00

FL 33122

[M//MI, FL 33122	74(17)	3. Date Incorporated or Qualified Lo / Z 4 / 97	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 2103 NW 74 AV	26 2103 NW 79 AV.	65-0789692	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State MIAMI FL	City & State 28 MIAM FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33122 25 USA	29 33122 30 USA	This corporation owes the current year In Personal Property Tax.	tangibte □ Yes ☑No

9. Name and Address of Current Registered Agent AMERILAWYER 343 ALMERIA AV. CORAL GABLES FL 33134

	- F Telsorial Floper	y I DA.	
	10. Name and Addr	ress of New Registere	d Agent
81	Name FEBERICO	AROCENA	
82	Street Address (P.O. Box Number 2103 NW +9	is Not Acceptable)	
83			
			7

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. 41,0149

SIGNATURE	J. H				>/ //	
	Signature, typed or printed name of registered agent and title if applica	able. (NOTE: Re	egistered Agent signature i			
12.	OFFICERS AND DIRECTOR	RS	13.	ADDITIONS/CHANGES TO OFFICER		_
TITLE	PD	DELETE	1.1 TITLE	PD	Change	Addition
NAME	CHARLES CHENG		1.2 NAME	CHARLES CHENG		
STREET ADDRESS			1.3 STREET ADDRESS	2103 NW 79 AV		}
CITY-ST-ZIP	M14M1 FL 33122		1.4 CITY-ST-ZIP	MIAMI FL 33122		
TITLE	√ p	☐ DELETE	2.1 TITLE	VP	Change	☐ Addition
NAME	FRANK CHENG		2.2 NAME	FRANK CHENG		
STREET ADDRESS	2103 NW 79 AV.		2.3 STREET ADDRESS	2103 NW 79 AV		
CITY-ST-ZIP	MIAMI FL 33122		2.4 CITY-ST-ZIP	MIAMI FL 33122		
TITLE	SD	□ DELETE	3.1 TITLE	SD ARACTALA	Change	☐ Addition
NAME	FEDERICO_ AROLENA_		.3.2 NAME	FEDERICO AROCENA		
STREET ADDRESS			3.3 STREET ADDRESS	2103 NW +9 AV,		
CITY-ST-ZIP	MIAMI FL 33122		3.4. CITY-ST-ZIP	MIAMI FL 33127		
TITLE	TD	☐ DELETE	4.1 TITLE	EDWARD CHENS	Change	☐ Addition
NAME	EDWARD CHENG		4. 2 NAME	EDWATE DITCH		
STREET ADDRESS	2103 NW +9 AV.	i	4.3 STREET ADDRESS	2103 NW 79 AV.		
CITY-ST-ZIP	MIAMI FL 33122		4.4 CITY-ST-ZIP	MIAMI FC 37122		
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME	fold address was		Ì
STREET ADDRESS			5.3 STREET ADDRESS	(1624 NW 82AV.)		
CITY-ST-ZIP			5.4 CITY+ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	MIAMI FL 33176	☐ Change	☐ Addition
NAME	,		6.2 NAME		<u>:</u>	
STREET ADDRESS			6.3 STREET ADDRESS			}
CITY OF 7th			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, with all other like empowered.

SIGNATURE: 5

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEDERICO