Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90034 027 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000094545

STAR TRADING INTERNATIONAL INC.								
	•							
Principal Place	e of Business	Mailing Address	·		-	ANGE LINCKI OLINIAL ONCO		
8655 NW 56TH ST 8655 NW 56 ST MIAMI FL 33166 MIAMI FL 33166					DO NOT MUDITE IN TH	IIO ODACE		
US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
	to a warm of the second		-		11/04/1997			
Principal Place of Business Za. Mailing Address					4. FEI Number	Ар	plied For	
21 7275	5 NW 68 ST	26 7275 NW 6	85T_		65-0791891	No	t Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A		
City & State City & State 23 MIAMI FLORIDA 28 MIAMI FLOR					6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip 23/	Country	Zip 29 33/66 30	Country DADE		This corporation owes the current year Personal Property Tax.	Intangible	□No	
<u></u>	9. Name and Address of Current	_ 	<u>'</u>		10. Name and Address of New Register	ed Agent		
CARDENAS, NESTOR R				81 Name LOBSANG RAMPA MARQUES				
13815 S.W. 84TH ST			82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33183			83 7	275	NW 685T #4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			84 City			**EL 85 Zip (Code 166	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-name	ed corpo	retion and mile this statement for the number	of changing its	registered	
agent	m tamiliar with and accept the obligation	ons of, Section 607.0505, Florida	Statutes.	, pordiro	nation submits this statement for the purpose is board of directors. I hereby accept the ap			
SIGNATURE	× Solvino 49/10	and title if applicable. (NOTE: Reg	jistered Agent signatu	ne required	when reinstating) DATE	777	}	
12.		DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		RS IN 12	
TITLE	D	DELETE	1.1 TITLE	P		Change	Addition	
NAME	CARDENAS, NESTOR R	/ `	1.2 NAME		BSANG RAMPA MARQUES			
STREET ADDRESS	13815 S.W. 84TH ST		1.3 STREET ADDRES		75 N.W. 685T#4		Ì	
CITY-ST-ZIP	MIAMI FL 33183		1.4 CITY-ST-ZIP	M	IAMI, FL 33166			
TITLE		☐ DELETE	2.1 TITLE	VF		Change	Addition	
NAME	· <u>.</u>		2.2 NAME	EU	NICE RODRIGUES DA SILVA	FER NAN.	DES	
STREET ADDRESS	}		2.3 STREET ADDRES		75 N.W. 6857#4		ļ	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	14	IAMI, FL 33166			
TITLE		☐ DELETE	3.1 TITLE			· Change	Addition	
NAME	•		3.2 NAME	1			ļ	
STREET ADDRESS	-		3.3 STREET ADORES	S\$				
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition f	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADDRES	SS			ł	
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP	+-		☐ Change	Addition	
TITLE		€ DELETE	5.1 TITLE 5.2 NAME					
,NAME	1		5.3 STREET ADDRES	88	•		1	
STREET ADDRESS			5.4 CITY-ST-ZIP					
CITY-ST-ZIP	<u> </u>	☐ DELETE	6.1 TITLE	+		☐ Change	Addition	
TITLE		_ 0 0000,0	6.2 NAME	Ì				
NAME	1		1	1			1	

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.

6.3 STREET ADDRESS

8.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

(30s) 463 8000