

**FILED**  
**May 05, 1999 8:00 am**  
**Secretary of State**

05-05-1999 90067 039 \*\*\*150.00

<b>PROFIT CORPORATION</b> <b>ANNUAL REPORT</b> <b>1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>
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**DOCUMENT # P98000014244**

1. Corporation Name

**TRADE POWER SERVICE, INC.**

Principal Place of Business

 C/O LISA A. LANDY, ESQ.  
 ONE SE 3RD AVENUE 28TH FLOOR  
 MIAMI FL 33131

Mailing Address

 C/O LISA A. LANDY, ESQ.  
 ONE SE 3RD AVENUE 28TH FLOOR  
 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/12/1998

4. FEI Number

65-0831959

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 Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

**AMERICAN INFORMATION SERVICES, INC.**  
**ONE SE 3RD AVENUE 28TH FLOOR**  
**MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

 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

 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

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

D/P/S

ROGELIO CERVANTES

ONE S.E. 3RD AVENUE, 28TH FLOOR

MIAMI, FL 33131

2.1 TITLE

22 NAME

23 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

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:

Rogelio Cervantes, President April 27, 1999 (305) 715 9408

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)