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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Katherine Harris

FILED May 13, 1999 8:00 am

ANN	JAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS			Secretary of State 05-13-1999 90028 048 ***150.00			
DOCU 1. Corporation	IMENT #				i	130.00	
	SPANISH TRADE	ERS, INC.					/
Principal Plac	ce of Business	Mailing Address					
2650	Biscayne Blvd.	2650 Biscayı	ne E	Blvd.	i I		
	Miami, Florida 33137 Miami, Florid				DO NOT WRITE IN THI	S SPACE	
					3. Date Incorporated or Qualifed 05/12/1998		
	Place of Business	2a. Mailing Address 26 26 50 Biscayne Blvd.			4. FEI Number		plied For
Suite, Apt.	# ata	26 2050 B1SCa	yne	BIAG.			t Applicable
22.	. #, etc.	27			5. Certifcate of Status Desired	\$8.75 A Fee Red	
City & Sta	te	City & State Miami, Flor	rid:		6. Election Campaign Financing	\$5.00	
Zip	Country	Zip Zip	Cou		Trust Fund Contribution	Added to	o Fees
24	25	— a à a a m		JSA	8. This corporation owes the current year In Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	l Agent	
	_			81 Name			
Neal L. Sandberg, Esq. 82 Str 2650 Biscayne Blvd.				82 Street	Address (P.O. Box Number is Not Acceptable)		
	i, FL 33137			83			
uranı.	I, FD 33137						
			ĺ	84 City	FI	85 Zip C	Code
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida. Such change was au	thorized	by the corpo	corporation submits this statement for the purpose of pration's board of directors. I hereby accept the appora-	f changing its sintment as rec	registered gistered
SIGNATURE							
12.	Signature, typed or printed name of registered age OFFICERS AN	ID DIRECTORS			ADDITIONS/CHANGES TO OFFICERS A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		1.1 TI	l.E	President/Director	★ Change	Addition
WALLE !	Neal L. Sandber	:g	1.2 NA	ME	Tomas A. Mestre		
STREET ADDRESS	2650 Biscayne Boulevard		1.3 ST	REET ADDRESS	4201 S.W. 248th Street		
CITY-ST-ZIP	Miami, FL 33137		_	Y-ST-ZIP	Redlands, Florida 33	032	Addition
TITLE NAME		□ DETE!#	2.1 TM			Change	Addition
STREET ADDRESS			ı	REET ADDRESS			• .
CITY-ST-ZIP			ħ.	ry-st-zip			
TITLE		☐ DELETE	3.1 771	LE		Change	☐ Addition
NAME			3.2 NA/	VÆ .			
STREET ADDRESS			1	REET ADORESS			
TITLE		☐ DELETE	4.1 TIT	Y-ST-ZIP		Change	(Adaition
NAME		<u></u>	4. 2 NA				_
STREET ADDRESS			ā.	REET ADDRESS			1
CITY-ST-ZIP			44 CIT	Y-ST-ZIP			<u>-</u>
TITLE		☐ DELETE	5 1 TITE	1		Change	Addition
MAME			5.2 NAM	1			
STREET ADDRESS			Я	REET ADDRESS Y-ST-ZIP			
CITY-ST-ZIP (☐ DELETE	6.1 T/TI			[] Change	Addition
NAME		_ ,	62 NA				
			CA CTC	SELT ADDDESS			

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.

64 CITY-ST-ZIP

SIGNATURE:

(305) 662-1927