

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P98000082542

1. Corporation Name

PORT LAND INTERNATIONAL TRADING INC.

Principal	Place of Business	Mailing Address			I IBBIIBBI IIB IBIBI IBIII BBIII BBIII BBIII	14 18118 11381 81111 AIRIA 1181 IANI
11461 NW	51ST TERRACE	11461 NW 51ST TERR	ACE			
MIAMI FL		MIAMI FL 33178			DO NOT WRITE IN THE	C CDACE
1	2 ~			:	DO NOT WRITE IN THI 3. Date Incorporated or Qualifed	S SPACE
					1	
A Dringi	pal Place of Business	2a, Mailing Address			09/23/1998 4. FEI Number	Applied For
	pai riace of business	 			165-0865636	Not Applicable
21 Suito	Ant # oto	Suite, Apt. #, etc.				\$8.75 Additional
—	Apt. #, etc.	27	•		5. Certifcate of Status Desired	Fee Required
22 City 8	State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	, State	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	intry	a. This corporation owes the current year I	ntangible
24	25	29	30	······•	Personal Property Tax.	Yes XNo
24	9. Name and Address of Current	11	00		10. Name and Address of New Registere	d Agent
	5, Harris and Address of Services	. rrogiotoros rigorio		81 Name		
	BECKMAN, EDSON			<u> </u>		
	11461 NW 51ST TERRACE			82 Street A	ddress (P.O. Box Number is Not Acceptable)	1
	MIAMI FL 33178			83		
				84 City	F	85 Zip Code
		607 4800 FI-24- 6	No. 4 dea tho a	hava namad si	orporation submits this statement for the purpose	bo
) offic	a or registered agent, or both, in the State (of Florida. Such change w	vas authorized	l by the corpora	ation's board of directors. I hereby accept the app	ointment as registered
age	nt. I am familiar with, and accept the obligat	ions of, Section 607.0505	5, Florida Stati	utes.	·	
SIGNAT	URE STATEMENT				uired when reinstation). DATE	
	Signature boad or printed name of registered agent		·	Agent signature req	uired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
12.	OFFICERS ANI	D DIRECTORS	13. ΓΕ 1.1 ΤΓ	ne l	ADDITIONS/CHANGES TO OFFICERS A	☐ Change ☐ Addition
TITLE	PVST		12 N			
NAME	BECKMAN, EDSON		1210			
STREET ADI	DRESS 11461 NW 51ST TERRACE			1		
CITY-ST-ZII	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	•		TREET ADORESS		
		□ ocus	1.4 CI	TREET ADORESS		□ Change □ Addition
TITLE	D	☐ DELET	1.4 CI	TREET ADORESS TY-ST-ZIP TLE	e e e e e e e e e e e e e e e e e	☐ Change ☐ Addition
	D BECKMAN, EDSON	☐ DELET	1.4 CI TE 2.1 TI 2.2 N	TREET ADORESS TY-ST-ZIP TLE AME	e e er sig	☐ Change ☐ Addition
TITLE	D BECKMAN, EDSON 11461 NW 51ST TERRACE	DELET	1.4 CI TE 2.1 TI 2.2 N	TREET ADORESS TY-ST-ZIP TLE	e consumer of the constant of	☐ Change ☐ Addition
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NAME STREET AD	D BECKMAN, EDSON 11461 NW 51ST TERRACE	□ DELET	1.4 CI ΓΕ 2.1 Π 2.2 N 2.3 S1 2.4 C	TREET ADORESS TTY-ST-ZIP TLE AME TREET ADORESS ITY-ST-ZIP TLE		☐ Change ☐ Addition ☐ Change ☐ Addition
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NAME STREET AD CITY-ST-ZII	D BECKMAN, EDSON 11461 NW 51ST TERRACE MIAMI FL 33178		1.4 CI Σ1 TI 22 N/ 23 SI 2.4 C ΣΕ 3.1 TI 3.2 N/	TREET ADORESS TTY-ST-ZIP TLE AME TREET ADORESS ITY-ST-ZIP TLE	·	<u> </u>
NAME STREET AD CITY-ST-ZII TITLE NAME	D BECKMAN, EDSON 11461 NW 51ST TERRACE MIAMI FL 33178		1.4 CI TE 2.1 TI 2.2 NV 2.3 ST 2.4 CI TE 3.1 TI 3.2 NV 3.3 ST	TREET ADORESS TTY-ST-ZIP TLE AME TREET ADORESS ITY-ST-ZIP TLE AME		☐ Change ☐ Addition
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Mar 24, 1999 8:00 am

Secretary of State

03-24-1999 90084 048 ***150.00