

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

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90202 049 ***158.75

DOCUMENT # S08785

1. Corporation Name

NICTRADE, INC.

Principal Place of Business

2730 SW 3RD AVE
SUITE 206
MIAMI FL 33129
US

Mailing Address

2730 SW 3RD AVE
SUITE 206
MIAMI FL 33129
US

2. Principal Place of Business

21 270 CRANWOOD DRIVE
Suite, Apt. #, etc.

2a. Mailing Address

26 PO BOX 491438
Suite, Apt. #, etc.

City & State

23 Key Biscayne, FL

City & State

28 Key Biscayne, FL

24 33149 25 USA 29 33249 30 USA

9. Name and Address of Current Registered Agent

JUNCADELLA, MARIANO
2730 SW 3RD AVE
SUITE 206
MIAMI FL 33129

3. Date incorporated or Qualified

10/25/1990

4. FEI Number

65-0224495

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.

☒

No

10. Name and Address of New Registered Agent

81 Name

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

270 CRANWOOD DRIVE

83

84 City

Key Biscayne

FL

85 Zip Code

33149

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

Mariano Junca

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

(NOTE: Registered Agent signature required when reinstating)

2/11/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
JUNCADELLA, MARIANO
STREET ADDRESS
270 CRANWOOD DR.
CITY-ST-ZIP
KEY BISCAYNE FL 33149

TITLE ☐ DELETE

NAME
CUADRA, JAVIER A
STREET ADDRESS
9835 SW 118TH AVENUE
CITY-ST-ZIP
MIAMI FL 33186

TITLE ☐ DELETE

NAME
CARDENAL-CUADRA, ELISA
STREET ADDRESS
9835 SW 118TH AVENUE
CITY-ST-ZIP
MIAMI FL 33186

TITLE ☐ DELETE

NAME
JUNCADELLA, MARIA C
STREET ADDRESS
270 CRANWOOD DR.
CITY-ST-ZIP
KEY BISCAYNE FL 33149

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

270 CRANWOOD DRIVE

Key Biscayne, FL 33149

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

270 CRANWOOD DRIVE

Key Biscayne, FL 33149

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

Mariano Junca FILED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-17-99 305-361-0518

Date

Daytime Phone #

CR2E034 (1/98)