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 # 1. Corporation Name S31760

REACH TRADING & INVESTMENT, INC.

Principal Place of Business Mailing Address				T 188010878 1880 tytelt yibrit debite diret mest ment dent den gemen ment		331 A1A11 #4811 A1A11 A.	
2742 BISCAYNE BLVD. 2742 BISCAYNE BLVD.		2742 BISCAYNE BLVD.					
MIAMI FL 33137 MIAMI FL 33137					DO NOT WRITE IN THIS SPACE		
US US					3, Date Incorporated or Qualifed		
					02/14/1991		
2. Principal Pl	ace of Business	2a. Mailing Address	****		4. FEI Number	App	lied For
21	•	26			65-0243691	Not	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
22	·	27				Fee Req	
City & State	e · · · · ·	City & State			6. Election Campaign Financing	\$5.00 N Added to	• 1
23	28 .				Trust Fund Contribution 8. This corporation owes the current year		7 1 8 6 3
Zip			Country		Personal Property Tax.		□No
24	9. Name and Address of Current		<u> </u>		10. Name and Address of New Register	ed Agent	
	o. Hamo and Madrobs of Carrent		81	Name			·
HELCER, ROBERTO				Stroot Addr	ess (P.O. Box Number is Not Acceptable)		
2149 NW 79 AVE			82	Street Addit	SSS (F.O. BOX Number is Not Acceptable)		
MIAMI FL 33122			83				
			84	City		85 Zip C	ode
		·		•	oration submits this statement for the purpose	-L	
agent. I a	m familiar with, and accept the obligati	and title if applicable. (NOTE: Re	a Statutes.	t signature required		· · ·	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	Addition
TITLE	DP :	☐ DELETÉ	1.1 TITLE			Change	
NAME	HELCER, ROBERTO		1.2 NAME				
STREET ADORESS	2149 NW 79 AVE		1.3 STREET				
CITY-ST-ZIP	MIAMI_FL	☐ DELETE	1.4 CITY-ST 2.1 TITLE	I-ZIP		Change	Addition
TITLE		2.2 N					
NAME OTDETT ADODESO			2.3 STREET	ADDRESS			}
STREET ADORESS	•		2:4 CITY-S		المارية المعاولة على العالم المنطقة ال	جه <u>د الترمونت</u> .	
TITLE		☐ DELETE 3.1 TI				Change	Addition
NAME	,	3.2 N					
STREET ADDRESS	· . *		3.3 STREET	ADDRESS			-
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			
TITLE			4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS	•		4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME	'		☐ Change	☐ Addition
NAME			5.3 STREET	LADADESS		•	
STREET ADDRESS	· .		5.4 CITY-S			•	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	1-21-		Change	Addition
TITLE			62 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 Charter 607, Florido 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.

CYRED

SIGNATURE:

STREET ADDRESS 🦿

CITY-ST-ZIP

SIGNING OFFICER OR DIRECTOR

19a

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90132 036 ***150.00