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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S53776

(8)

INTERNATIONAL TRADE, INC.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address											III 1091i 100(0 (JIM BIBNI DIBN				
14421 SW 146 PLACE MIAMI FL 33186				14421 SW 146 PLACE MIAMI FL 33186						DO	O NOT WRIT	E IN THIS	SPACE			
									3.	Date Incorporated	or Qualified	1				
									Ì	05/17/1991						
2. Principal Place of Business				2a. Mailing Address					4.	4. FEI Number					d For	
21				26						65-0260362					pplicable	₽
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5.	Certificate of Statu	s Desired		\$8.7 Fee	5 Addi Regul		
City & State				City & State					6.	Election Campaign	_	r) 0 Ma		
Zip Country				Zip Country						Trust Fund Contribution						4
	25			29 30			JOI 10 y			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.						
24	9. Name and Address of Current								10	10. Name and Address of New Registered Agent					\dashv	
LIAC				3			81	Name			, , , , , , , , , , , , , , , , , , ,	iog.oto.ou	- Igont			
	SAN, TANVEER															_
14421 S W 146TH PLACE Miami Fl 33186							82	Street Address (P.O. Box Number is Not Acceptable)								
MIM	MI FL 33 100					-	83						· -			\dashv
	+															⅃
				. <u> </u>			84	City				FL	.	ip Cod		
office or re agent. I a	io i ne provisions egi ste red agent m fa miliar with, i	s of Sections , or both, in and accept t	607.0502 and re State of Fi he obligation:			tes, the ab authorized orida Stati	oove d by utes	the corp	corporatio poration's b	n submits this state poard of directors. I	ment for the hereby acc	purpose of ept the app	changin ointment	g its re as reg	gistered istered	'
SIGNÁTURE			ee m	111 de								1-16-	98			
12.	Signature, lyped or p		istered agent and ERS AND DIF		a (NO)	E. Registered	I Ager	nt signature r	required when	n reinstating) ADDITIONS/CHANG	בפידה הבכ	DATE ICEDO ANIO	DIDECT	ODEIN	140	5
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CITY-ST-ZIP	GOULDS FI					1.4 CIT										
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NAME						2.2 NA										
STREET ADDRESS						2.3 ST	REET	ADDRESS								
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TITLE					DELETE	3.1 TIT							Chang	je 🗀	Addition	
NAME						3.2 NA	ME									
STREET ADDRESS						3.3 ST	REETA	ADDRESS								
CITY-ST-ZIP						3.4 CI	TY-S	T-ZIP								
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NAME						4. 2 NA	ME									1
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CITY-ST-ZIP						6.4 CIT	γ-s	-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 eceiver 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 a lattachment with an address.