

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY 11 AM 8:35

DOCUMENT # V12239 (2)

1. Corporation Name

LUNDI TRADING CORPORATION

Principal Place of Business

% BRIAN J. GILLER
975 - 41ST STREET
MIAMI BEACH FL 33140

Mailing Address

% BRIAN J. GILLER
975 - 41ST STREET
MIAMI BEACH FL 33140

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/06/1992

3a. Date of Last Report

07/15/1994

4. FEI Number

65-0312967

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 has liability for intangible tax under s. 198.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 3380 NW 114th ST.

2a. Mailing Address

26 3380 NW 114th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Miami, FL

28 Miami, FL

Zip

Country

Zip

Country

24 33167-3331

25 USA

29 33167-3331

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILLER, BRIAN J.
975 - 41ST STREET
MIAMI BEACH FL 33140

81 Name

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

83

84 City

FL

85

Zip Code

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

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PST
SCHECHTER, BENO
20225 NE 34TH CT #1714
N. MIAMI BEACH FL

11 TITLE

PST
Schechter, BENO
1915 Brickell Ave. C-1402
MIAMI, FL 33129

☒ Change ☐ Addition

NAME

12 NAME

STREET ADDRESS

13 STREET ADDRESS

CITY ST ZIP

14 CITY - ST - ZIP

TITLE

VD
SCHECHTER, BENO
20225 NE 34TH CT #1714
N. MIAMI BEACH FL

21 TITLE

VD
SCHECHTER, BENO
1915 Brickell Ave. C-1402
MIAMI, FL 33129

☒ Change ☐ Addition

NAME

22 NAME

STREET ADDRESS

23 STREET ADDRESS

CITY ST ZIP

24 CITY - ST - ZIP

TITLE

31 TITLE

☐ Change ☐ Addition

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY ST ZIP

34 CITY - ST - ZIP

TITLE

41 TITLE

☐ Change ☐ Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY ST ZIP

44 CITY - ST - ZIP

TITLE

51 TITLE

☐ Change ☐ Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY ST ZIP

54 CITY - ST - ZIP

TITLE

61 TITLE

☐ Change ☐ Addition

NAME

62 NAME

STREET ADDRESS

63 STREET ADDRESS

CITY ST ZIP

64 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 registered agent empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BENO SCHECHTER

5/24/95 (305)681-4477

Date

Signature Number