FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **V17589** **(5)**

1. Corporation Name

MULLER TRADING & HOLDING, INC.

Principal Place of Business

150 S.E 25 RD.
#8M
MIAMI FL 33129

Mailing Address

150 S.E 25 RD.
#8M
MIAMI FL 33129

3. Date Incorporated or Qualified: **02/28/1992**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **65-0328973** — 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. 199.032, Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City, & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City, & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent

MULLER, SERGIO
150 S.E. 25 RD # 8M
MIAMI FL 33129

10. Name and Address of New Registered Agent

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 Section [illegible] Florida Statutes, the above named [illegible] document for the purpose of changing its registered office or registered agent, or both, in the State of Florida. [illegible] the appointment as registered agent. I am familiar with and accept the obligations of [illegible] Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MULLER, SERGIO
STREET ADDRESS	150 SE 25 RD # 8M
CITY, ST, ZIP	MIAMI FL 33129
TITLE	☐ DIRECTOR
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DIRECTOR
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DIRECTOR
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DIRECTOR
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DIRECTOR
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
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CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 with an title or designation appropriate to my capacity as officer or director.

SIGNATURE: Sergio Muller — Pres. — 3/25/96 — (305) 859-7745

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone Number

CR2E034 (12/95)