## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Jun 09, 2004 8:00 am Secretary of State 06-09-2004 90001 041 \*\*\*150.00 DOCUMENT # V40832 TRAPEZA OVERSEAS, INC. 44046310 Principal Place of Business Mailing Address 8306 MILLS DR. 8306 MILLS DR. SUITE 393 SUITE 393 MIAMI, FL 33183 MIAMI, FL 33183 US 2. Principal Place of Business $POB_{0X}$ 2 3. Mailing Address PO BOX 228332 Suite. Apt. #, etc 06042004 Chg-P CR2E034 (10/03) Cilv & State City & State 4. FEI Number Applied For Not Applicable 65-0336730 \$8.75 Additional 5. Certificate of Status Desired ·Fee Required 6. Name and Address of Current Registered Agent 7.- Name and Address of New Registered Agent Name ARGUELLES, JOSE Street Address (P.O. Box Number is Not Acceptable) 8306 MILLS DR. SUITE 393 MIAMI, FL 33183 City Zip Code 8. The above na entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation SIGNATURE. printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Due by September 8, 2004 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DATE ☐ Delete HILE Change ☐ Addition ARGUELLES, JOSE I NAME NAME PO Box 228332 8306 MILLS DRIVE SUITE 393 STREET ADDRESS STREET ADDRESS Miam; FC 33122 CITY-ST-ZIP MIAMI, FL 33183 CITY-S1-ZIP Delete THLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change | ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CHY-S1-ZIP CITY-\$1-ZIP ☐ Delete TITLE ☐ Change ☐ Addition BILLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CHY-SI-ZP ☐ Change Addition Delete DITE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ Delete THE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 report or supplemental 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 of trustage empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 12. I hereby certify that the informatio SIGNATURE: X SIGNATURE AND TYPE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytimu Phone #

FILED

TRAPEZA OVERSEAS INC. PO BOX 228332 MIAMI, FL 33122

##achmene # V40832 44046310

Friday, June 04, 2004

DEPARTMENT OF STATE DIVISION OF CORPORATION PO BOX 6327 TALLAHASSEE, FL 32314

RE: UNIFORM BUSINESS REPORT #V40832

We are filing to pay the annual report for our FOR-profit corporation. We apologize; we never received any of the prior notices.

We did not intentionally filed late because we never received any correspondence -from your department by the post office. We moved and forgot to notify the department of our new address. Please, We respectfully ask for an abatement of the penalty charges and accept our filing and the check for \$150.00 covering the 2004 filing. We have corrected the discrepancy with the post office and all reports will be filed on time from now on.

Thank you for your understanding and attention to our case.

JOSE I ARQUELLES - PRESIDENT