

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

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
GARY A. B. MONTGOMERY
Secretary of State
TALLAHASSEE, FLORIDA 32304

1995 MAR 20 PM 1:06

DOCUMENT # V59427

(7)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

TRADE CENTER IMPORTS, INC.

600001436126

-03/22/95--01041--011

******200.00 ****200.00**

DO NOT WRITE IN THIS SPACE

Principal Place of Business

**2225-B INDUSTRIAL BLVD
SARASOTA FL 34234
US**

Mailing Address

**2207 INDUSTRIAL BLVD
SARASOTA FL 34234**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22 City & State

27

City & State

23 Zip

28

Zip

24 Country

29

Country

25

30

Country

3. Date Incorporation or Qualification

08/20/1992

3a. Date of Last Report

04/22/1994

4. FEI Number

65-0352868

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

9. Name and Address of Current Registered Agent

**DART, JOHN M
DART, FORD & SPIVEY, P.A.
1549 RINGLING BLVD., SUITE 600
SARASOTA FL 34236**

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 Sections 607.0502 and 607.1506, 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 the corporation)

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**CDP
MACLER, HENRY H
2225-B INDUSTRIAL BLVD.
SARASOTA FL**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**DTS
WENINGER, ROBERT M
2225-B INDUSTRIAL BLVD.
SARASOTA FL**

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 199.032, Florida Statutes. I further certify that the information appearing in 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 Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/95

813-357-0933