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Secretary of State

PROFIT CORPORATION
 ANNUAL REPORT
 1997



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

DOCUMENT # **S49454** (9)
 1. Corporation Name: **SAMMAX TRADING CORPORATION**



Principal Place of Business: **2124 NORTHEAST 123RD STREET ROOM 205 MIAMI FL 33181**
 Mailing Address: **2124 NORTHEAST 123RD STREET ROOM 205 MIAMI FL 33181-2839**

2. Principal Place of Business: **21 13251 NE 17 AVE**
 Suite, Apt. #, etc.
22 NORTH MIAMI
 City & State
23 NORTH MIAMI
 City & State
24 33181 Zip **25 USA** Country
26 13251 NE 17 AVE
 Suite, Apt. #, etc.
27 NORTH MIAMI
 City & State
28 NORTH MIAMI
 City & State
29 33181 Zip **30 USA** Country

3. Date Incorporated or Qualified: **04/29/1991**
 3a. Date of Last Report: **02/14/1996**
 4. FEI Number: **65-0283163**
 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

BELEITAO, MARCIO
9341 E BAY HARBOR DR.
BAY HARBOR FL 33154

10. Name and Address of New Registered Agent

81 Name: ANTONIO CLARET BASKERVILLE IERARDI
82 Street Address (P.O. Box Number is Not Acceptable): 13251 N.E 17 AVE
83 KARKRAFT
84 City: NORTH MIAMI FL 85 Zip Code: 33181

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:

(NOTE: Registered Agent signature required when reinstating)

DATE: **3/18/97**

12. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	DIETERICH, MARTA	
STREET ADDRESS	9341 E BAY HARBOR DR	
CITY-ST-ZIP	BAY HARBOR FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DELEITAO, MARCIO	
STREET ADDRESS	9341 E BAY HARBOR DR	
CITY-ST-ZIP	BAY HARBOR FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	ANTONIO CLARET BASKERVILLE IERARDI	
13 STREET ADDRESS	13251 N.E 17 AVE	
14 CITY-ST-ZIP	NORTH MIAMI, FL 33181	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do 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 contained 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 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 if changed, or on an attachment with an address.

SIGNATURE:
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE: **03/18/97** TELEPHONE: **(305) 899-1259**

CR2E034 (9/96)