## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # COZCZ4

## **FILED** Feb 21, 1999 8:00 am Secretary of State

02-21-1999 90016 039 \*\*\*150.00

1. Corporation	ED TRADING, INC.						
Principal Place of Business Mailing Address					1 (Maile allie sell (Sele allis) and all		
75 NE 40 STREET 75 NE 40 STREET						<u>.</u>	
MIAMI FL 33137 MIAMI FL 33137					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					08/05/1981		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apı	olied For
21 26 26					59-2117185	Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
27					5. Certificate of Status Desired	Fee Re	quired
City & State City & State					6. Election Campaign Financing	\$5.00	
23		28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year		□No
24	25	29 3	0		Personal Property Tax.  10. Name and Address of New Register		LINO_
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New Register	ea Again	<del></del>
AGA	DWAL DAIML		"	Hame			
AGARWAL, RAJNI 660 CAMPANA AVE . CORAL GABLES FL 33156			82	Street Add	ress (P.O. Box Number is Not Acceptable)	,	
			83				
CON	AL GADLES I'L 33130		63				
			84	City	<b>_</b>	85 Zip C	Code
	607.06	02 and 607 1509 Florida Statutos	the above	p-named corr	poration submits this statement for the ournose	of changing its	registered
	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was autopations of, Section 607.0505, Florid	la Statutes		on's board of directors. I hereby accept the ap	jonanom da ra	· .
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
TITLE	PST	☐ DELETE	1.1 TITLE		-	Change	Addition
NAMÉ	AGARWAL, RAJANI		1.2 NAME				
STREET ADORESS	·		1.3 STREET	TADDRESS		.1	
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME			2.2 NAME				ļ
STREET ADDRESS			2.3 STREET	T ADDRESS	e company of the present of	-	
CITY-ST-ZIP			2. 4 CITY-S	ST-ZIP			
TITLE	DELETE 3.1		3.1 TITLE			Change	☐ Addition
NAME			3.2 NAME			*,	ļ
STREET ADDRESS			3.3 STREE	T ADDRESS		•	ĺ
CITY-ST-ZIP			3.4. CITY-S	ST-ZIP	, ,		[] Addition
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS				T ADDRESS	•		
CITY-ST-ZIP				T-ZIP		☐ Change	Addition
TITLE		☐ DETEIF	5.1 TITLE 5.2 NAME		•		dd.,,,,,
NAME			1	T ADDRESS	. •	•	
STREET ADDRESS		,	5.4 CITY-S				
CITY-ST-ZIP			6.1 TITLE	71 - ZIT		☐ Change	Addition
TITLE		Doctere				3-	. –
NAME			D.Z NAMP				
STREET ADDRESS			6.2 NAME 6.3 STREE	T ADDRESS			

14. 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 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 feceiver or trustee in powered 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, with all other like empowered.

SIGNATURE:

Daytime Phone #