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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1996

	1996	DIVISION (	21 23111 (311111)			
DOCUMENT # F9300000227 (9) 1. Corporation Name						
IMPO	RT COMMODITY GROUP LT	TD., CORPORATION				
Principal Place	of Business	Mailing Address		·· ·	[  #866  #814  8814  <b>68</b> 11 <mark>8</mark>	(010 HBH 1904 1004
9270 N.W. 100 ST.		AIOP BLDG A-5				
MEDLEY FL	. 33178	HOOKCREEK BLVD VALLEY STREAM N				
		US		3. Date Incorporated or Qualified 01/19/1993	3a. Date of Last 04/03/1	Report <b>005</b>
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	1 00/100/1	Applied For
21	H -1.	26		11-2924251		Not Applicable
Suite, Apt.:	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional
City & State	0	City & State		6. Election Campaign Financing		Required  May Be
23		28		Trust Fund Contribution		ed to Fees
Ζφ 24]	Country 25	Zip	Country	8. This corporation has liability for i		s 199.032,
<u>** </u>	9. Name and Address of Curren	29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	30	Florida Statutes Yes  10. Name and Address of New R	No	
			81 Nanie	to. Hame and Address of New F	egistered Agent	
	i, robert		<b>82</b> Street Add	dress (P.O. Box Number is Not Acceptab	763	
	.W. 100 ST.			areas (r. c. box Number is Not Acceptab	ne)	
MEDLE	Y FL 33178		83			
			84 City		<b> 8</b> 5 2	7ip Code
11 Purcuant t	to the provisions of Sections 607 0503	and 607 1500 Florida Chil	<u></u>	pration submits this statement for the pur		
	th, and accept the obligations of Section			varion submits this statement for the pur and of directors. I hereby accept the appo	pintment as registere	d agent. Lam
familiar wit	Signature, typod or printed name of registered agent in	on 607.0505, Florida Statut		and of directors. I hereby accept the appoint	Dintment as registere	d agent. I am
familiar wit SIGNATURE	Signature, typed or printed name of registered agent.  OFFICERS AND  CDP	on 607.0505, Florida Statut	nzed by the corporation's bot es. NOTE Projected Agent square, it pre	erd of directors. Thereby addept the appo	Dintment as registere	d agent. I am
familiar wit SIGNATURE  12.  TIFLE NAME	Signature, typed or printed name of registered agent OFFICERS AND CDP VITERITTI, FRANK	and Story Charge was aumoion 607.0505, Florida Statut and little if applicable (  D DIRECTORS	NOTE Respective Agent synapse in Lieu  13.	and of directors. I hereby accept the appoint	Dintment as registere  DATE  OERS AND DIRECT	d agent. I am ORS IN 12
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Esytone Frame # Date