

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

**FILED**  
**May 09 1997 8:00am**  
**Secretary of State**



PROFIT CORPORATION  
 ANNUAL REPORT  
**1997**

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

DOCUMENT # **H29062**  
**TRADE NETWORK INTERNATIONAL, INC.**

1. Place of Business <b>7154 N. University Dr. Suite 288 Tamarac, FL 33321-2916</b>		Mailing Address <b>7154 N. University Dr. Suite 288 Tamarac, FL 33321-2916</b>	
2. Principal Place of Business	2a. Mailing Address	21. State, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State	23. Zip	28. Zip
24. Country	25. Country	29. Country	30. Country

3. Date Incorporated or Qualified <b>11/05/1984</b>	3a. Date of Last Report <b>11/14/96</b>
4. FEI Number <b>59-2587378</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**Certified Paralegals, Inc.  
 101 N. State Road 7 #-5  
 Margate, FL 33063**

10. Name and Address of New Registered Agent

81. Name <b>PAUL R. MARCUS</b>
82. Street Address (P.O. Box Number is Not Acceptable) <b>9990 S.W. 77th Ave. PH-1</b>
83. City <b>MIAMI</b>
84. State <b>FL</b>
85. Zip Code <b>33156</b>

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: **PAUL R. MARCUS** (Registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) **4/30/97**

12. OFFICERS AND DIRECTORS

TITLE <b>President, Secretary, Treasurer</b>	<input type="checkbox"/> DELETE
NAME <b>FRANK HART</b>	
STREET ADDRESS <b>7521 RED ROAD #3</b>	
CITY, ST, ZIP <b>Miami, FL 33143</b>	
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

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

**800002185578**  
**-05/20/97--01090--008**  
**\*\*\*165.00**

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 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 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 amendment with an address.

SIGNATURE: **FRANK HART** (PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) **April 30, 1997** **666-6603**

CR2E034 (9/96)