FILED Apr 06, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # .119785

| 1. Corporation Name | | | | | |
|--|--|----------------------------------|----------------------------------|--|-------------------------|
| 5 & 5 1 | TRADER ENTERPRISES, INC | • | | | |
| | | | | | |
| | | | | | |
| Principal Plac | e of Business | Mailing Address | | | |
| 14 ATLANTIC AVE. 5024 LINCOLN ST. | | | | | |
| THE BEACH PLACE HOLLYWOOD FL 33021 FT. LAUDERDALE FL 33316 US | | | | DO NOT WRITE IN TH | IIS SPACE |
| US | | •• | | 3. Date Incorporated or Qualifed | |
| | | | | 06/17/1986 | Ì |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 17 5. | ATLANTIC Blud. | 26 | | 59-2688800 | Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | #228 | 27 | | 5. Certificate of Status Desired | Fee Required |
| City & Stat | te 1 - 1-1 El | - City & State | • | 6. Election Campaign Financing | \$5.00 May Be |
| 23 F. | LAUDFIDANE Fl | 28 | | Trust Fund Contribution | Added to Fees |
| Žip 337 | Country | Zip | Country | 8. This corporation owes the current year | |
| 24 55 | | 29 3 | 0 | Personal Property Tax. | Yes No |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name | | | | | nor Agent |
| SAN | IDER, WOODY | | 81 Name | | |
| 5024 LINCOLN ST | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) | |
| HOLLYWOOD FL 33021 | | | 83 | | |
| , | | | 63 | | |
| | | | 84 City | F | 85 Zip Code |
| 44.5 | | 1 007 4500 Ft | 1 | poration submits this statement for the purpose | |
| office or r | egistered agent, or both, in the State o | of Florida. Such change was autl | horized by the corporat | tion's board of directors. I hereby accept the app | pointment as registered |
| agent. I a | m familiar with, and accept the obligati | ons of, Section 607.0505, Florid | la Statutes. | | |
| SIGNATURE | Signature, typed or printed name of registered agent | and title if applicable (NOTF: R | egistered Agent signature requir | red when reinstating) DATE | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS | AND DIRECTORS IN 12 |
| TITLE | PD | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | SANDER, WOODROW | | 1.2 NAME | • | |
| STREET ADDRESS | 5024 LINCOLN ST. | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | HOLLYWOOD FL 33021 | | 1.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME. | - | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2. 4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETÉ | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | - | |
| STREET ADDRESS | . , | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ** | | 3.4. CITY-ST-ZIP | | |
| TITLE | ** | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | · | | 4. 2 NAME. | | |
| STREET ADDRESS | | | . 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | Fineres | 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE | | ☐ DELETE | 5.1 TITLE - 5.2 NAME | | ☐ Change ☐ Addition |
| NAME | · | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | i |
| CITY-ST-ZIP | | ☐ DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | | Change Addition |
| TITLE | | - Detere | 6.2 NAME | | C) curation [C] Google |
| NAME | | | 6.3 STREET ADDRESS | | ł |
| STREET ADDRESS | | | S.S STINCE, I ADDRESS | <u>-</u> | ſ |

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 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 chapted, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE;