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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J98911 TRACE AMERICA, INC.

(7)

Apr 22 1997 8:00am Secretary of State

FILED



| Principal Place | of Business | Mailing a | Mailing Address 7280 N.W. 58TH STREET MIAMI FL 33166-3719 | | | | | | | |
|----------------------------------|---|------------------------|---|-------------------|--------|---------------------|--|---------------------------------------|-----------------------|---|
| 7260 N.W. 58TH MIAMI FL 33166 | | | | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualified 10/22/1987 | | te of Last 12/1996 | |
| 2. Principal Pla | ace of Business | 2a. Maili | ng Address | | | | 4. FEI Number | | | Applied For |
| 21 | | 26 | | | | | 65-0006060 | | | Not Applicabl |
| Suite, Apt. # | , etc | | , Apt. #, etc. | | | | | | | 5 Additional |
| 2 | | 27 | | | | | 5. Certificate of Status Desired | | Fee | Required |
| City & State | | City | & State | | | | 6. Election Campaign Financing | | \$5.0 | 0 May Be |
| 3 | | 28 | | | | | Trust Fund Contribution | | | d to Fees |
| Zifi | Country | Zip | | Cou | nlry | | 8. This corporation has liability for | intangible : | ax unde | r s. 199.032, |
| 4] | 25 | 29 | | 30] | | | |] Yes [| | |
| | 9. Name and Address of Curre | nt Registered | Agent | | | | 10. Name and Address of New Re | gistered A | gent | |
| JOHI | NSTON, DAVID | | | | 81 | Name | | | | |
| 7260 | NW 58TH STREET | | | Ì | B2 | Street Addr | ess (P.O. Box Number is Not Acceptal | niel | | |
| | E 203 | | | | | JUVUI AUUI | ומוקסטפר זטוי פו זטעווונויו אט ניי, ין פיי | , | | |
| | AI FL 33166 | | | | 83 | | | | Leafill. | |
| | | | | , | _ | | | · · · · · · · · · · · · · · · · · · · | 7 | |
| | | | | | 84 | City | | FL | 85 Zi | p Code |
| 44 Dozement to | a the provisions of Sections 607.00 | 02 and 607 15/ | 18 Florida Statu | ites the at | مبرد | -named core | coration submits this statement for the jion's board of directors. I hereby acce | ournoon of | channing | n ite ranietara |
| SIGNATURE | Signature Type I or printed name of registered ag | ent and lefe if applic | | TE Registered | 1 Age | nt signature requir | ed when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND | DIRECT | ORS IN 12 |
| orte | Ď | io on coron | DELETE | 1.3 10 | ı F | | 7,5571010,07711020 10 0171 | JE1107410 | Change | |
| VAME | BIGUM, ANTHONY | | | 1.2 NA | | | | | | |
| STREET ADDRESS | 10 TREFOREST DR, CLAYTOI | N | | | | ADDRESS | | | | |
| ì | VICTORIA, AUSTRALIA | • | | 1 | | ì | | | | |
| City - S1 - ZIP Till E | PD | | DELETE | 1.4 CH 2.1 TH | | 1-211 | | | Chang | e Additio |
| NAME | JOHNSTON, DAVID | | 23 00000 | 2.2 NA | | | | | 49 | |
| 1 | 7260 N.W 58TH ST | | | | | 4DODECO | | | | |
| STREET ADDRESS | MIAMI FL | | | | | ADORESS | | | | |
| CHTY - ST - ZOP | D | , | DELETE | 2 4 CI 3 1 TIT | | 1-219 | | | Chang | e Additio |
| 1 | REID, IAN D. | | C DETELL | | | İ | | | TT CHOUNT | o Monte |
| NAME | 30 MONRO RD., KOOYONG | | | 3.2 NA | | Annesee | | | | |
| STREET ADDRESS | MELBOURNE, AUSTRALIA | | | | | ADDRESS | | | | |
| CITY - ST - ZIF | MELDOURINE, AUSTRACIA | | DELETE | 3.4. CI | _ | T- ZIP | | | Chang | e Additio |
| TITE F | | | FT DEFEIF | 4.1 TiT | | | | | UIMIKJ | le TI WORK |
| NAME | | | | 4. 2 N/ | | ADDRESS | | | | |
| SHEET ADDRESS | | | | | | ADDRESS | | | | |
| CHY-ST ZI⊬ | | , | December 1 | 4.4 C) | | T- ZIP | | | Char | a 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |
| TIRF | | | DELETE | 5.1 111 | | - | | | Chang | e [] Additio |
| NAME | | | | 5.2 NA | | | | | | |
| STREET ADDRESS | | | | | | address | | | | |
| City-St-ZiP | | | 50.000 | 5.4 CH | | 1-21P | | | | |
| TITLE | | | DELETE | 6.1 TIT | LLE | | | | ☐ Chang | e 🔲 Additio |
| NAME | | | | 6.2 NA | ME | | | | | |
| STREET ADDRESS | | | | 6.3 \$1 | reet. | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 6.4 CI | TY-\$1 | r- 21P | | | | |

14. I do hereby cert by 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 attachment with an address.

SIGNATURE: