


FILED

May 13 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # K12318</b>		<b>(7)</b>	
<b>1. Corporation Name</b> <b>ALBEE, TRADING GROUP, INC.</b>			
<b>Principal Place of Business</b> XXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXX FT LAUDERDALE FL 33310 US		<b>Mailing Address</b> PO BOX 5947 FT LAUDERDALE FL 33310-5947 US	
<b>2. Principal Place of Business</b> <b>21</b> 5030 Champion Blvd Suite Apt. #, etc.		<b>2a. Mailing Address</b> <b>26</b> Suite, Apt. #, etc.	
<b>22</b> 6-115 City & State		<b>27</b> City & State	
<b>23</b> Boca Raton, FL Zip Country		<b>28</b> Zip Country	
<b>24</b> 33496 <b>25</b>		<b>29</b> <b>30</b>	
<b>9. Name and Address of Current Registered Agent</b>			
<b>MICHELL, DAINA</b> <b>1331 NE 28 AVE</b> <b>POMPANO BCH FL 33062</b>			<b>81</b> Name <b>82</b> Street Address <b>83</b> <b>84</b> City
<b>11.</b> Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida. Such change was authorized by the corporation or registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
<b>SIGNATURE:</b> _____ (NOTE: Registered Agent signature required)			
<b>12. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>STD</b> <b>FRANCO, GERARDO</b> <b>8775 FIRST STREET, APT 227</b> <b>SILVER SPRINGS MD</b>	<input checked="" type="checkbox"/> <b>DELETE</b>	<b>13.</b> <b>1.1 TITLE</b> <b>1.2 NAME</b> <b>1.3 STREET ADDRESS</b> <b>1.4 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>DP</b> <b>MICHELL, DAINA</b> <b>1331 NE 28 AVE</b> <b>POMPANO BCH FL</b>	<input type="checkbox"/> <b>DELETE</b>	<b>2.1 TITLE</b> <b>2.2 NAME</b> <b>2.3 STREET ADDRESS</b> <b>2.4 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>D</b> <b>O NEILL, TRACEY</b> <b>5030 CHAMPION BLVD 6-115</b> <b>BOCA RATON FL</b>	<input type="checkbox"/> <b>DELETE</b>	<b>3.1 TITLE</b> <b>3.2 NAME</b> <b>3.3 STREET ADDRESS</b> <b>3.4 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> <b>DELETE</b>	<b>4.1 TITLE</b> <b>4.2 NAME</b> <b>4.3 STREET ADDRESS</b> <b>4.4 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> <b>DELETE</b>	<b>5.1 TITLE</b> <b>5.2 NAME</b> <b>5.3 STREET ADDRESS</b> <b>5.4 CITY-ST-ZIP</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<input type="checkbox"/> <b>DELETE</b>	<b>6.1 TITLE</b> <b>6.2 NAME</b> <b>6.3 STREET ADDRESS</b> <b>6.4 CITY-ST-ZIP</b>
<b>14.</b> I do hereby certify that the information supplied with this filing does not qualify for the exemption stated information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
<b>SIGNATURE:</b> <u>Daina Michell</u> <b>DAINA MICHELL</b>			



CR2E034 (9/96)