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

PROFIT CORPORATION ANNUAL REPORT 1000

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 20, 1999 8:00 am Secretary of State 02-20-1999 90144 044 \*\*\*150.00

SELLING AGENTS TO THE TRADE, INC.									
rincipal Place of	f Business	Mailing Addres	ss			, 100			
650 VIA GIULIA 8650 VIA GIULIA									
OCA RATON FL 33496		8903 GLADES ROAD #L9213 BOCA RATON FL 33496			DO NOT WRITE IN THIS SPACE				
\$		US				3. Date Incorporated or Qualife	u		
						11/07/1988 4. FEI Number		App	lied For
Principal Plac	e of Business	2a. Mailing Ad	ioress			65-0081615			Applicable
Cuita Ant #	otc	Suite, Apt.	. #, etc.			5. Certifcate of Status Desired		<b>\$8.75</b> A	
Suite, Apt. #,	eic.	27							<del>`</del>
City & State		City & Sta	ite			Election Campaign Financin     Trust Fund Contribution	g 🗆	\$5.00 ( Added to	
J		_ 28		Country		This corporation owes the c	urrent year li	ntangible	
Zip	Country	Zip	30	¬ .		Personal Property Tax.		Yes	□No
1	9. Name and Address of Cur	29 29 Age				10. Name and Address of Nev	v Registere	d Agent	
	g, Name and Address of the			. 81	_Name,	The many of the second			
ARJE,	ERICH W.			82	Street Addr	ess (P.O. Box Number is Not Acce	ptable)	•	
	VIA GIULIA			83					
BOCA RATON FL 33496				63				85 Zip Code	
								. 1851 400	JULE
agent. I am	n familiar with, and accept the ob	ligations of, Section 6	07.0505, Florid	da Statutes.	•	poration submits this statement for on's board of directors. I hereby ac	DATE	of changing its pointment as re	
agent, I am	n familiar with, and accept the ob	agent and title if applicable.  AND DIRECTORS	(NOTE: F	s, the above thorized by the statutes.  Registered Agent	e-named corp the corporation	poration submits this statement for on's board of directors. I hereby act and when reinstating)  ADDITIONS/CHANGES TO	the purpose cept the app	of changing its pointment as re	ORS IN 12
office of recagent. I am SIGNATURE 5	of familiar with, and accept the ob Signature, typed or printed name of registered OFFICERS	agent and title if applicable.  AND DIRECTORS	07.0505, Florid	s, the above thorized by da Statutes.	e-named corp the corporation	ad when reinstating)	the purpose cept the app	of changing its cointment as re-	ORS IN 12
office or recapitation agent. I am SIGNATURE  SIGNATURE  SIGNATURE  NAME	of familiar with, and accept the observed agent, or both, and accept the observed or printed name of registered OFFICERS  D  ARJE, ERICH W.	agent and title if applicable.  AND DIRECTORS	(NOTE: F	s, the above thorized by da Statutes.  Registered Agen  13.  1.1 TITLE  1.2 NAME	e-named corp the corporation	ad when reinstating)	the purpose cept the app	of changing its cointment as re-	ORS IN 12
office or regagent. I am SIGNATURE STITLE STREET ADDRESS	of familiar with, and accept the observation of printed name of registered OFFICERS  D  ARJE, ERICH W.  8650 VIA GIULIA	igations of, Section 6 agent and title if applicable. AND DIRECTORS	07.0505, Florid	s, the above thorized by to da Statutes.  Registered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S'	e-named corporation the corporation of signature require	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12
office or recapent. I am SIGNATURE  SIGNATURE  SIGNATURE  NAME	of familiar with, and accept the observed agent, or both, and accept the observed or printed name of registered OFFICERS  D  ARJE, ERICH W.	igations of, Section 6 agent and title if applicable. AND DIRECTORS	(NOTE: F	s, the above thorized by the da Statutes.  Registered Agenta 13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE	e-named corporation the corporation of signature require	ad when reinstating)	the purpose cept the app	of changing its cointment as re-	DRS IN 12
office or recagent. I am SIGNATURE 5  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	of familiar with, and accept the observation of familiar with a second	igations of, Section 6 agent and title if applicable. AND DIRECTORS	07.0505, Florid	s, the above thorized by the da Statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE 2.2 NAME	e-named corporation the corporation of signature requires	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12
SIGNATURE SIGNATURE SIGNATURE SITTLE NAME STREET ADDRESS CITY-ST-ZIP TIILE NAME	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	igations of, Section 6 agent and title if applicable. AND DIRECTORS	07.0505, Florid	s, the above thorized by the da Statutes.  Registered Agent 13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE 2.2 NAME 2.3 STREET	e-named corp the corporation of the corporation of	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12 Additi
office or reg agent. I am SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	of familiar with, and accept the observation of familiar with a second	agent and title if applicable.  AND DIRECTORS	07.0505, Florid	s, the above thorized by the da Statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE 2.2 NAME	e-named corp the corporation of the corporation of	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12 Additi
office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by ida Statutes.  Registered Agent 13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S' 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	e-named corporation the corporation of the corporat	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12 Additi
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by it da Statutes.  Registered Agent 13.  1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	e-named corporation the corporation of the corporat	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12 Additi
office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by it da Statutes.  Registered Agen  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREET  2.4 CITY-S  3.1 TITLE  3.2 NAME  3.3 STREET  3.4 CITY-S  3.4 CITY-S	e-named corp the corporation of the corporation of	ad when reinstating)	the purpose cept the app	of changing its pointment as re-	DRS IN 12 Additi
Office or regarded. I am SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by the control of the control	e-named corp the corporation t signature require  I ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research.  AND DIRECTO Change Change	DRS IN 12 Additi
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by the control of the control	e-named corp the corporation  It signature require  IT ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research.  AND DIRECTO Change Change	DRS IN 12 Additi
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by the control of the control	e-named corporation the corporation of address in the corporation	ad when reinstating)	the purpose cept the app	of changing its pointment as research that the change Change	DRS IN 12 Addition Addition Addition
office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid	s, the above thorized by ida Statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 STREET 4.2 NAME 4.3 STREET	e-named corp the corporation the corporation the signature require traddress	ad when reinstating)	the purpose cept the app	of changing its pointment as research.  AND DIRECTO Change Change	DRS IN 12 Addition Addition Addition
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid (NOTE: F	s, the above thorized by the control of the control	e-named corp the corporation  It signature require  IT ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research that the change Change	DRS IN 12 Addition Addition Addition
office or ree agent. I am SIGNATURE SIGNATURE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid (NOTE: F	s, the above thorized by it also statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.1 STREET 5.2 NAME 5.3 STREET	e-named corp the corporation  It signature require  IT ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research that the change Change	DRS IN 12 Additi
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Ö505, Florid (NOTE: F	s, the above thorized by the control of the control	e-named corp the corporation the corporation the signature require traddress traddress straip traddress straip traddress straip traddress straip	ad when reinstating)	the purpose cept the app	of changing its pointment as research that the change Change	DRS IN 12 Addition Addition Addition Addition
Office or ree agent. I am SIGNATURE \$\frac{12.}{S}\$  12. TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	of familiar with, and accept the observation familiar with, and accept the observation of familiar with a construction of	agent and title if applicable.  AND DIRECTORS	O7.Õ505, Florid (NOTE: F	s, the above thorized by it as the statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.4 CITY-S 5.5 STREET 5.4 CITY-S 5.5 STREET 5.4 CITY-S	e-named corp the corporation  It address IT ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research the change Change Change Change	DRS IN 12 Addition Addition Addition Addition
Office or reg agent. I am SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	of familiar with, and accept the ob- Signature, typed or printed name of registered OFFICERS  D ARJE, ERICH W. 8650 VIA GIULIA BOCA RATON FL 33496  D ARJE, ESTELLE R. 8650 VIA GIULIA BOCA RATON FL 33496	agent and title if applicable.  AND DIRECTORS	O7.Ö505, Florid (NOTE: F	s, the above thorized by it also statutes.  Registered Agen  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 NAME 6.3 STREET 6.1 TITLE 6.2 NAME	e-named corp the corporation  It address IT ADDRESS IT-ZIP  IT ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ad when reinstating)	the purpose cept the app	of changing its pointment as research the change Change Change Change	DRS IN 12 Additi