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PROFIT
CORPORATION
ANNUAL REPORT

1997

Lam an officer or director of appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K56584

(1)

SILVER LINING TRADING COMPANY

FILED May 13 1997 8:00am Secretary of State



Principal Place of Business C/O FAZAL DASANKOP		-	Mailing Address C/O FAZAL DASANKOP) radidili dat brija Bilai divat dini albi albi albi albi asti asti asti dibi bibu ibs.			
C/O FAZAL DASANKOP 11500 NORTH DALE MABRY, #1806 TAMPA FL 33618		11500 NOR	1500 NORTH DALE MABRY. #1806 TAMPA FL 33618-3864 NEW Advanta 2a. Mailing Address 26 7101 WARE HAM DR.						
						3. Date Incorporated or Qualified 01/03/1989 05/01/1996			
2. Principal Place of B	usiness	2a. Mailing	Address	OE HAM	AR.	4. FEI Number			pplied For
1		26	of Mu	C IIII		NOT APPLICABLE	······································		t Applicabl
Suite Apt. # etc.		27 Suite, 7	Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State		City	State PA	FL		6. Election Campaign Financing	. h		May Be
Zip	Country	28 Zin	<u> </u>	Country		Trust Fund Contribution 8. This corporation has liability	for integrable		to Fees
]	25	29 2	2647		. C. A.	Florida Statutes		Lax under s	, 199.032,
9. Na	me and Address of Cu					10. Name and Address of New	Registered /	\gent	
DASANKOP,	FAZAL			81	Name				
	LE MABRY #1806			82	Street Addr	ress (P.O. Box Number is Not Acce	otable)	·····	
TAMPA FL 3	3618			63			····		
				84	City		FL	85 Zip	Code
1. Pursuant to the pro	sions of Sections 607	.0502 and 607 1508	Florida Statute	es, the above	named corp	poration submits this statement for t	ne purpose of	changing l	ts registere
office or registered agent. I am familia	agent, or both in the S with, and a locol the o	State of Florida/Suctobligations of	n change was a 2 607,0505, Flo	uthorized by orida Statutes	the corporat	poration submits this statement for the tion's board of directors. I hereby actions	cept the app	ointment as	registered
GNATURE	azal to	santo	,						
Same		ed agent and litto if app out	ile (NOT)	E: Registered Age	nt signature recu	ediwhen (eliminatica)	DATE		
2.	OFFICERS								
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