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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L15442

VAN NEER TRADING CORPORATION

(1)

FILED Apr 30 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Addre	:88			1 100/1611 00% 1100/ 01111 01011 070/0 019/ 010/1 010/1 010/4 010/4 010/7 070/4 010/7 070/4		
C/O FRIEDMAN BAUR. ET AL 100 NORTH BISCAYNE BLVD. MIAMI FL 83132		100 NORTH BIS	C/O FRIEDMAN BAUR. ET AL 100 NORTH BISCAYNE BLVD. MIAMI FL 33132-2304					
						3. Date Incorporated or Qualified 09/11/1989	3a. Date of Las 04/23/1996	t Report
2. Principal P	lace of Business	2a. Mailing Ad	2a. Mailing Address 26			4. FEI Number 59-1348720	Applied For Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	1 1	5 Additional Required
City & Stat	е	City & Stat	С			6. Election Campaign Financing		00 May Be
23		28			· · 	Trust Fund Contribution		ed to Fees
Zip	Country	Zip		Country	/	8. This corporation has liability for i		rs. 199.032,
24	25 9. Name and Address of Cu	[29] rrent Registered Agen	[30]			Florida Statutes	Yes No	
BAU	R, THOMAS			81	Name	10,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
C/O FRIEDMAN, BAUR. ET AL				82	Street A	t Address (P.O. Box Number is Not Acceptable)		
	N. BISCAYNE BLVD., 21ST F	LOOR		L				
. MIAI	VII FL 33132			83				
-				84	City		FL 85 Z	ıp Code
office or r	registered agent, or both, in the S	itate of Florida. Such ch	ange was autho	prized by	y the corpo	corporation submits this statement for the poration's board of directors. I hereby accep	rross of changin	g its registered as registered
SIGNATURE	m familiar with, and accept the o	_				equired when iclustating)	DATE	
12.	OFFICERS	AND DIRECTORS		18.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
TITLE	PD UDO		DELETE	1.1 THE			☐ Chang	e 🔲 Addition
NAME	VAN NEER, UDO 100 N. BISCAYNE BLVD., 2	IST FLOOR		1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33132	TOT I LOOK		13 STREET				
TITLE			to the second control of	1.4 CITY - S 2.1 TIFLE	ot - Ale.		☐ Chang	e Addition
NAME			1	22 NAME				
STREET ADDRESS				2 3 STREET	ADDRESS	•		
CITY-ST-ZIP				2. 4 CITY- :	S1 - 7-P			
TITLE		Ц		3.1 THEF			Chang	e 🔲 Addition
NAME ADDRESS				3.2 NAME				
STREET ADDRESS CITY-ST-ZIP				3.3 STHEET				
TITLE				3.4. C(1Y - 5 4.1 Title	S1-71r		☐ Chang	e Addition
NAME				4.2 NAME				- "
STREET ADDRESS				4.3 \$18[£]	ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		4 4 CHY - S	1 - ZIP			 -
TITLE		L_J		5.1 TITLE	t		L_] Chang	e L Addition
NAME STREET ADDRESS				5.2 NAME	*DODESC			
CITY-ST-ZIP				5.3 STREET 5.4 CITY - S	i			
TITLE			651515	6 1 1171 F			Chang	e 🔲 Addition
NAME				6.2 NAME			•	_
STREET ADDRESS				63 SIREET	ADDRESS			
CITY-ST-ZIP				64 CH¥ S			·	
14. 100 heret	by certify that the information sup-	phed with th t t filing doe	s not qualify for	the exe	mption sta	ited in Section 119.07(3)(i). Florida Statutes	I further certify th	at the

I do hereby certify that the information supplied with thit, filing does not qualify for the exemption stated in Soction 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 am an officer or director of the corporation or the rectiver of 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 a lateritarity with an address.

😘 van Neer, President 4/23/97 (305)377-3561