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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M11949

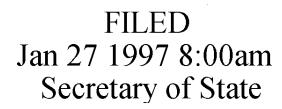
(8)

ANDER TRADING, INC.

Principal Place of Business
C/O ANDRES ELOY DIEUNGEN
4781 N.W. 72 AVENUE

Mailing Address

C/O ANDRES ELOY DIELINGEN 4781 N.W. 72 AVENUE MIAMI EL 33168-5616





MIAMI FL 33166	}	MIAMI FL 33168-5616					
					3. Date Incorporated or Qualified 02/26/1985 3a. Date of Last Report 08/13/1996		
2. Principa! Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			5 9- 2557813		Not Applicable
Suite, Apt. #, etc.		Suite Apt. #. etc.	¬ '		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing	\$5.	00 May Be
23		28			Trust Fund Contribution		ded to Fees
Zip	Country	Zιρ	Co	untry	8. This corporation has liability for in	ntangible tax und	ler s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Current		L	1	10. Name and Address of New Reg	gistered Agent	
DIFLI	INGEN, ANDRES ELOY			81 Name			
4781 N.W. 72 AVENUE				20 County Address (D.O. Des Musels via Not Assertable)			
	AI FL 33166		82 Street Addres		ress (P.O. Box Number is Not Acceptable)		
MILAMI FE 50 100				83			
		:		84 City		FL	Zip Code
office or re	o the provisions of Sections 607.0502 gistered agent for both, in the State (ri familiar with, and accept the obliga	of Florida. Such change was a	authorize	ed by the corporat	poration submits this statement for the p cion's board of directors. I hereby accep	urpose of changi at the appointmen	ng its registered it as registered
SIGNATURE _	Steparture typed or poole Learne of registered ager	ntaed tirrutag plicable (NOT)	E: Bogister	ed Agent signature requir	red when reinstaling)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
1/11.6	PDS	☐ DELETE	1.13	TITLE		☐ Cha	nge Addition
NAME	DIELINGEN, ANDRES ELOY		1.23	NAME			
STREET ADDRESS	10742 S.W. 142 COURT		135	STREET ADDRESS			
	MIAMI FL		1	CITY-ST-ZIP			
CITY-\$1-7/2 TITLE	VPT	DELETE		INLE		Cha	nge Addition
NAME	DIELINGEN, MARIANELLA			NAME			
1	10742 S.W. 142ND CT.			ŀ			
STREET ADORESS	MIAMI FL			STREET ADDRESS			
CITY - S1 - 24P	MINIMI I L	☐ DELETE	_	CITY-ST-ZIP		Cha	nge Addition
THILE				TITLE		L.J Olia	inge 🗀 roution
NAMI				NAME			
STREET ADDRESS				STREET ADDRESS			
City - St - ZiP		D DELETE	_	CITY-ST-ZIP		TT CL.	ngo Additie-
TITLE		☐ DELETE		DILE		☐ Cha	inge 🛄 Addition
NAME			4. 2	NAME			
STREET ADDRESS			4.3	STREET ADDRESS			
C:TY+S1+2/P			4.4	CITY-ST-ZIP		 	
TITLE		☐ DELETE	5.1	TITLE		Cha	inge L. Addition
NAME:			5.2	NAME			
STREET ADDRESS			5.3	STREET ADDRESS			
CiTY - ST - ZiP			54	CITY-ST-ZIP			
TITLE		DELETE		TITLE		Cha	inge 🔲 Addition
NAME			6.2	NAME			
STREET ADDRESS				STREET ADDRESS			
l .				CITY - ST - ZIP			
CITY-ST ZIP		tuits the films does not quali			d in Section 119 07/3V// Florida Statute	e I further cortifu	that the

4. I do hereby certify 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 charged, or on an attachment with an address.

SIGNATURE:

GNATURE AND TYPEO OR PRINTED NAME OF SIGNING SPICER OR DIRECTOR

197 305-477-712'