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

**PROFIT** CORPORATION **ANNUAL REPORT** 

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 04 1998 8:00am Secretary of State

	1990 -		AVISION OF			Societary	or state
1. Corporation	MENT # M5369 RADING CORPORATION	93	(1)				118# 10# 11# 11# 11# 11# 11# 1
Bringing Place	of Business	Mailion Add	dioce				)
Principal Place of Business Mailing Address							
800 E. CYPRESS CREEK RD 800 E. CYPRESS CREEK RD. SUITE 302 SUITE 302							
FT. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334				334		DO NOT WRITE IN THIS S	PACE
US US						3. Date incorporated or Qualified	
						06/11/1987	
	ace of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26				59-2816659	Not Applicable
Suite, Apt.	#, <b>e1</b> c.	Suite, Apt. #, etc.				<b>5.</b> Certificate of Status Desired	\$8.75 Additional
27			<u> </u>			***************************************	Fee Required
City & State		City & State				6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip				Count		Trust Fund Contribution	Added to Fees
<u> </u>	25	<b>├</b> ─┐		Country 30		This corporation owes or has paid the curr     Personal Property Tax due June 30.	rent year intangible <b>Y</b> Yes □ No
24	25 Name and Address of Curr	29 ent Registered Ac	ent	30		10. Name and Address of New Registered A	
KOI	NIG, MARCOS			8	Name		
	E CYPRESS CREEK RD			ļ_			
STE 302					Street Ad	Idress (P.O. Box Number is Not Acceptable)	
FT LADUERDAEL FL 3334					3		
T TENDOLINOALE TE 0007							
				84	City	FL	85 Zip Code
11. Pursuant t	o the provisions of Sections 607.0 agistered agent, or both, in the Sta	502 and 607.1508, ite of Florida, Such	Florida Statut	es, the abo authorized b	ve-named co by the corpor	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appoint	changing its registered bintment as registered
SIGNATURE							
	Signature, typed or printed name of registered in		(NOI	13.	gent signature rec	quired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12
12.	OFFICERS AND DIRECTORS  DELETE			1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	KONIG, MARCOS	•					
STREET ADDRESS	P.O. BOX 694345 N/A				T ADDRESS		
CITY-ST-ZIP	MIAMI FL			1.4 CiTY-			
TITLE	***************************************		DELETE	2.1 TITLE	31-1/1		Change Addition
NAME		•		2.2 NAME			
STREET ADDRESS					1 ADDRESS		
CITY-ST-ZIP				2.4 CITY			
TITLE			DELETE	3.1 THILE			Change Addition
NAME				3.2 NAME			
STREET ADDRESS				4	T ADDRESS		
CITY-ST-ZIP				3.4. CITY			
TITLE		I	DELETE	4.1 TITLE			Change Addition
NAME				4. 2 NAM			
STREET ADDRESS				4.3 STREE	1 ADDRESS		
CITY-ST-ZIP				4.4 CiTY-	ST-ZIP		
TITLE			DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREE	1 ADDRESS		
CITY-ST-ZIP				5.4 CITY -	ST-ZIP		:
TITLE		T	DELETE	6.1 111LE			Change Addition
NAME				6 2 NAME			
STREET ADDRESS				6.3 STREE	T ADDRESS		
CITY-ST-ZIP				6.4 C(1)	S1-21P		
14. Thereby c	ertify that the information supplied	with this filing does	not qualify f			in Section 119.07(3)(i), Florida Statutes. I further cer	tify 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

(unu) 928-2010