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Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M59656 (2)
1. Corporation Name
F & M TRADING CORPORATION



Principal Place of Business Mailing Address
~~15920 SW 144 CT~~
~~PLAZA 31-170~~
~~MIAMI FL 33177~~
~~US~~
~~P O BOX 165817~~
~~PLAZA 31-STE 170~~
~~MIAMI FL 33116-5917~~
~~US~~

3. Date Incorporated or Qualified 09/24/1987
 3a. Date of Last Report 07/08/1996
 4. FEI Number 65-0078052 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 21 164 Bent Oak
 Suite, Apt. #, etc.
 22
 City & State 23 Royal Palm Beach, FL
 Zip Country 24 33411 US
 25
 2a. Mailing Address 26 1129 Royal Palm Beach Blvd.
 Suite, Apt. #, etc. 27 Ste. 060
 City & State 28 Royal Palm Beach, FL
 Zip Country 29 33411 US
 30

9. Name and Address of Current Registered Agent
 ALVARADO, FABIO
~~15920 SW 144 COURT~~
~~MIAMI FL 33177~~

10. Name and Address of New Registered Agent
 81 Name FABIO ALVARADO
 82 Street Address (P.O. Box Number is Not Acceptable) 164 Bent Oak
 83
 84 City Royal Palm Beach FL 85 Zip Code 33411

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and I accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *FABIO ALVARADO* PD FABIO ALVARADO 4/21/97
 Signature, typed or printed name of registered agent and title if applicable (NOTE) Registered Agent signature required when reinstating DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ALVARADO, FABIO	
STREET ADDRESS	15920 SW 144 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	ALVARADO, MILVA	
STREET ADDRESS	15920 SW 144 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	ALVARADO, YOLANDA	
STREET ADDRESS	15920 SW 144 COURT	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	ALVARADO, FABIO	
13 STREET ADDRESS	164 Bent Oak	
14 CITY-ST-ZIP	Royal Palm Beach, FL 33411	
2.1 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ALVARADO, MILVA	
2.3 STREET ADDRESS	164 Bent Oak	
2.4 CITY-ST-ZIP	Royal Palm Beach, FL 33411	
3.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Thompson, Yolanda A.	
3.3 STREET ADDRESS	1307 McDermott Lane	
3.4 CITY-ST-ZIP	Royal Palm Beach, FL 33411	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 changed. I attach herewith an address.

SIGNATURE *FABIO ALVARADO* FABIO ALVARADO (PD) April 21, 1997 (561) 792-9498

CR2E034 (9/96)