

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

**FILED**

**May 18 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

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



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 104 BENT OAK, ROYAL PALM BEACH FL 33411, US  
Mailing Address: 1129 ROYAL PALM BEACH BLVD. STE. 060, ROYAL PALM BEACH FL 33411, US

3. Date Incorporated or Qualified: 09/24/1987

2. Principal Place of Business: 21 1129 ROYAL PALM BEACH BLVD., 22 060, 23 ROYAL PALM BEACH, FL, 24 33411, 25 US

4. FEI Number: 65-0078052

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

g. Name and Address of Current Registered Agent: ALVARADO, FABIO, 104 BENT OAK, ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent: 81 Name ALVARADO FABIO, 82 Street Address 2461 VILLAGE BLVD., 83 APT. 303, 84 City WEST PALM BEACH FL, 85 Zip Code 33409

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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                     | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                      |
|----------------------------|---------------------|---|--------------------------------------|
| TITLE                      | PD                  | 1.1 TITLE   | PD                                   |
| NAME                       | ALVARADO, FABIO     | 1.2 NAME  | ALVARADO, FABIO                      |
| STREET ADDRESS             | 164 BENT OAK        | 1.3 STREET ADDRESS                                    | 1129 ROYAL PALM BEACH BLVD. STE. 060 |
| CITY-ST-ZIP                | ROYAL PALM BEACH FL | 1.4 CITY-ST-ZIP                                       | ROYAL PALM BEACH, FL 33411           |
| TITLE                      | SD                  | 2.1 TITLE   | SD                                   |
| NAME                       | ALVARADO, MILVA     | 2.2 NAME  | ALVARADO, MILVA                      |
| STREET ADDRESS             | 164 BENT OAK        | 2.3 STREET ADDRESS                                    | 1129 ROYAL PALM BEACH BLVD. STE. 060 |
| CITY-ST-ZIP                | ROYAL PALM BEACH FL | 2.4 CITY-ST-ZIP                                       | ROYAL PALM BEACH, FL 33411           |
| TITLE                      | TD                  | 3.1 TITLE   | TD                                   |
| NAME                       | THOMPSON, YOLANDA A | 3.2 NAME  | THOMPSON, YOLANDA A.                 |
| STREET ADDRESS             | 1307 MCDERMOTT LANE | 3.3 STREET ADDRESS                                    | 1129 ROYAL PALM BEACH BLVD. STE. 060 |
| CITY-ST-ZIP                | ROYAL PALM BEACH FL | 3.4 CITY-ST-ZIP                                       | ROYAL PALM BEACH, FL 33411           |
| TITLE                      |                     | 4.1 TITLE   |                                      |
| NAME                       |                     | 4.2 NAME  |                                      |
| STREET ADDRESS             |                     | 4.3 STREET ADDRESS                                    |                                      |
| CITY-ST-ZIP                |                     | 4.4 CITY-ST-ZIP                                       |                                      |
| TITLE                      |                     | 5.1 TITLE   |                                      |
| NAME                       |                     | 5.2 NAME  |                                      |
| STREET ADDRESS             |                     | 5.3 STREET ADDRESS                                    |                                      |
| CITY-ST-ZIP                |                     | 5.4 CITY-ST-ZIP                                       |                                      |
| TITLE                      |                     | 6.1 TITLE   |                                      |
| NAME                       |                     | 6.2 NAME  |                                      |
| STREET ADDRESS             |                     | 6.3 STREET ADDRESS                                    |                                      |
| CITY-ST-ZIP                |                     | 6.4 CITY-ST-ZIP                                       |                                      |

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14. I 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 or in an attachment with an address.

SIGNATURE: FABIO ALVARADO (PRESIDENT) 4/20/02 (561) 616-8873

CR2E034 (10/97)