FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLOR/DA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Scoretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** FLORIDA TRADE INTERNATIONAL, INC. Principal Place of Business Mailing Address 500 EAST SEMORAN BLVD., STE. 2-E 200 EAST ROBINSON STREET CASSELBERRY FL 32707 STE. 500 ORLANDO FL 32801 3. Date Incorporated or Qualified 3a. Date of Last Report 06/21/1988 04/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2894376 26 Not Applicable Suite. Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired 22 П 27 Fee Required City & State Oity & State 6. Election Campaign Financing \$5.00 May Be 23 \Box 28 Trust Fund Contribution Added to Fees Ζıρ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 Yes □ No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLORIDA CORPORATE SUPPORT, INC. 82 Street Address (P.O. Box Number is Not Acceptable) 200 EAST ROBINSON STREET SUITE 500 83 ORLANDO FL 32801 84 City 85 Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505. Florida Statutes. SIGNATURE 12 OFFICERS AND DIRECTORS CR2E034 (12/95) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSD TITLE DELETE ☐ Change Addition LUTHER, S W NAME 12 NAME 973 WILLOW RUN LANE STREET ADDRESS 1.3 STREET ADDRESS WINTER SPRINGS FL 32708 CITY - ST - ZIP 14 CHY ST ZIF TRUE DELFTE 2.1 1005 Change ncitibbA [NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-S1-ZIP 2.4 CITY - ST- ZIP TITLE DELETE 3 1 liftE ☐ Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 C-TY - ST - ZIP TITLE DELETE 4.17016 ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CHTY - \$1 - 2IP TITLE DELETE 5 1 Tille Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CHY - ST - ZIP TITLE DELFTE 6 1 Ti Ti, F Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CiTY - ST - 7rP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this arrupt 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 before ver 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 chargoot, or an appear with an address.

S.W. LUTHER

SIGNATURE: