FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P92000013097 (0)

R.S. 1	RADING COMPANY			. 1981/1891 (1881/1891 (1891/1891/1891/1891/1891/1891/1891/1891	### ##################################
Principal Place of Business 2673 S PARK LANE PEMBROKE PINES FL 33009		Mailing Address 2206 HOLLYWOOD BLVD HOLLYUWOOD FL 33020			
US		US		3. Date Incorporated or Qualified 12/21/1992	3a. Date of Last Report
2. Principal Pla	ce of Business	2a. Mailing Address		4. FE Number	04/24/1995 Applied For
21		26		65-0380231	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 Zip	Country	28		Trust Fund Contribution	Added to Fees
24	25	Zφ 29	Country 30	8. This corporation has liability for Florida Statutes	
	9. Name and Address of Curre		130	10. Name and Address of New I	
			81 Name		agista agont
ROSS MANELLA ESQ MANELLA, KLAPHOLZ & HOCHSZTEIN PA 2206 HOLLYWOOD BLVD			82 Street Ad	Idress (P.O. Box Number is Not Acceptal	la l
			62 Street Ad	idress (r.o. box indifficer is not acceptal	pie)
			83		
HOLLY	WOOD FL 33020		84 City		85 Zip Code
					FI '
CICALATURE	id agent, or both, in the State of Flor n, and accept the obligations of, Sec agrative lighed or printed have of rejustroscape.	aon 607.0009, Fiorda Statate	5	oration submits this statement for the public pard of directors. Thereby accept the app	
12.		UD DIRECTORS	Alti Pargiologia Agrilla seprante, o la 13.		DATE FICERS AND DIRECTORS IN 12
TITLE	DPV	☐ DELETE	1 1 11/1.8	ADDITIONS OF INNOES TO OF	Change Addition
NAME	RAZ, ETAN		1.2 NAME		A
STREET ADDRESS 2641 SOUTH PARK RD.			1.3 STREET ADDRESS	2673 So. Park Lane	
CITY-S1-ZIP	PEMBROKE PARK FL 3300	9	1.4 C(EY+S* 7)2		
TITLE	DST	DELETE	2 1 HIFLE		Change 🔲 Addition
NAME	SMILEY, NORMAN		2.2 NAME		
STREET ADDRESS	2641 SOUTH PARK RD.	_	2.3 STREET ADDRESS	2673 So. Park Lane	
CITY-ST-7IP	PEMBROKE PARK FL 3300		2.4 CHY - S1 - ZIF		
TITLE		☐ DELETE	3 1 711(2		Change Addition
NAME STREET ADDRESS			3.2 NAME		
CITY-ST-2IF			3.3 STREET ADDRESS		Ì
TITLE		□ DELETE	3 4 City - \$1 - ZiP 4 1 Titls E		Change Clade
NAME			4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - S1 - Z P		
TITLE		DELETE	5 1 Title		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP			5.4 CITY - ST. ZIF		
TrTLE		DELETE	6 1 71FLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 SPREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST-ZIP		
34 LON becelve	certify that the information conclude.	unto this toposis action solve him	بالأناب والقميم ومحاط امطط المطام	4-4	0.710.11

I. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stafed in Section 119.07(3)(k). 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 legar 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 Brock 12 or Block 13 if changed, or on an automicial with an address.

SIGNATURE:

SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR NORMAN SMILEY

4-18-96

305-964-204