
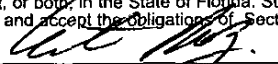


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May 06, 1999 8:00 am
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05-06-1999 90099 010 ***150.00



PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P92000013097			
1. Corporation Name R.S. TRADING COMPANY			
Principal Place of Business 2673 S PARK LANE PEMBROKE PINES FL 33009 US		Mailing Address 2500 HOLLYWOOD BLVD SUITE 212 HOLLYWOOD FL 33020 US	
2. Principal Place of Business 21 2673 S. Park lane Suite, Apt. #, etc. 22 City & State 23 Pembroke Park, FL Zip 24 33009 Country 25 US		2a. Mailing Address 26 2673 S. Park lane Suite, Apt. #, etc. 27 City & State 28 Pembroke Park, FL Zip 29 33009 Country 30 US	
9. Name and Address of Current Registered Agent ROSS MANELLA ESQ 2500 HOLLYWOOD BLVD. SUITE 212 HOLLYWOOD FL 33020		10. Name and Address of New Registered Agent 81 Name Etan Raz 82 Street Address (P.O. Box Number is Not Acceptable) 2673 So. Park lane 83 84 City Pembroke Park FL 85 Zip Code 33009	
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 X  Etan Raz, President 4/23/99 (NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS TITLE DPV NAME RAZ, ETAN STREET ADDRESS 2673 SO. PARK LANE CITY-ST-ZIP PEMBROKE PARK FL 33009 TITLE DST NAME SMILEY, NORMAN STREET ADDRESS 2673 SO. PARK LANE CITY-ST-ZIP PEMBROKE PARK FL 33009 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D/P/D/V/S/T 1.2 NAME Raz, Etan 1.3 STREET ADDRESS 2673 So. Park lane 1.4 CITY-ST-ZIP Pembroke Park, FL 33009 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: X

 Etan Raz, Pres. 4/23/99 (954) 964-3064
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0138657

CR2E034 (11/98)