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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000025325 (0)**

1. Corporation Name

LOYAL TRADING CORP.

Principal Place of Business

**13058 SW 133 CT
MIAMI FL 33186
US**

Mailing Address

**13058 SW 133 CT
MIAMI FL 33186
US**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

g. Name and Address of Current Registered Agent

29

30

**BORGES, ANTONIO LUIZ
6712 SW 114 AVE
MIAMI FL 33173**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.003 and 607.1506, Florida Statute, 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 accepting the appointment as registered agent. I am familiar with and accept the obligations of, Sections 607.003 and 607.1506, Florida Statute.

SIGNATURE

12.

OFFICERS AND DIRECTORS

1. Name

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

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NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. Name

2. Name

3. Name

4. Name

5. Name

6. Name

7. Name

8. Name

9. Name

10. Name

11. Name

12. Name

13. Name

14. Name

15. Name

16. Name

17. Name

18. Name

19. Name

20. Name

21. Name

22. Name

23. Name

24. Name

25. Name

26. Name

27. Name

28. Name

29. Name

14. I do hereby certify that the information supplied with this filing is correct and true and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statute. I further certify that the information included on this annual report is supplied without fraud 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statute; and that my name appears in Block 12 or Block 13 if changed from the prior year's filing.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Antonio Luiz Borges
President

3/14/96 (305) 232-3870

CR2E034 (12/95)