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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

3a. Date of Last Report

Applied For

\$8.75 Additional

813 973 2181

Not Applicable

3. Date Incorporated or Qualified

ס בDate ע גאס

04/21/1993

59-3181542

4. FEI Number

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED A

5440 PINEBARK LANE WESLEY CHAPEL FL 33543

21

DOCUMENT # P93000029414 (8)

26

Mailing Address 5440 PINEBARK LANE

2a. Mailing Address

Suite. Apt. #, etc.

WESLEY CHAPEL FL 33543-4458

FIDELITY TRADING INTERNATIONAL INC.

5. Certificate of Status Desired Fee Required 27 22 City & State City & State Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip This corporation has liability for intangible tax under s. 199,032, Yes 💹 No 24 25 30 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name OLIVITO, ANTHONY A **5440 PINEBARK LANE** 82 Street Address (P.O. Box Number is Not Acceptable) **WESLEY CHAPEL FL 33543** A3 City Zip Code 85 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 Signature, typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) Addition DELETE Change 1.1 TITLE TITLE OLIVITO, ANTHONY A NAME 1.2 NAME **5440 PINEBARK LANE** 13 STREET ADDRESS STREET ADDRESS WESLEY CHAPEL FL CITY - ST - ZIP 1.4 CITY - ST-ZIP DELETE Change Addition 21 TITLE TITLE OLIVITO, ANGELLA A 2.2 NAME NAME 5440 PINEBARK LN STREET ADDRESS 2.3 STREET ADDRESS WESLEY CHAPEL FL CITY-ST-ZP 2. 4 CITY - ST- ZIP DELETE Change ___ Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY ST ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-SI-ZIP 54 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- ZIP 14. I do 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 of 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