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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000029414 (8)

FIDELITY TRADING INTERNATIONAL INC.

Principal Place of Business Mailing Address 5440 PINEBARK LANE 5440 PINEBARK LANE WESLEY CHAPEL FL 33543 WESLEY CHAPEL FL 33543

## **FILED** Jan 16 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1993 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 59-3181542 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Country This corporation owes or has paid the current year Intangible Zip X Yes Personal Property Tax due June 30. 25 29 30 24 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** 83 84 City 85 Zip Code FI 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition Change DELETE 1.1 TITLE TITLE CR2E034 OLIVITO, ANTHONY A 1.2 NAME NAME 1.3 STREET ADDRESS 5440 PINEBARK LANE STREET ADDRESS WESLEY CHAPEL FL 1.4 CITY - ST - ZIP CfTY - ST - ZIP Change Addition DELETE TITLE 2.1 TITLE OLIVITO, ANGELLA A 2.2 NAME NAME 2.3 STREET ADDRESS 5440 PINEBARK LN STREFT ADDRESS WESLEY CHAPEL FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP DELETE \_\_\_ Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4,3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 5.1 TITLE TITLE 5,2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE 6.2 NAME

14. I hereby certify that the information supplied with this filling 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 an an attachment with an address. 1/3/98

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

8139732181