FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
'95 APR 17 PM 3:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000069354 (7)**

1. Corporation Name
CURRENCY TRADING INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
2502 ROCKY POINT DRIVE SUITE 862 TAMPA FL 33607	2502 ROCKY POINT DRIVE SUITE 862 TAMPA FL 33607

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/30/1993
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business	2a. Mailing Address
21 18008 Skypark circle	26 18008 Skypark Circle
Suite, Apt. #, etc. 22 Suite #270	Suite, Apt. #, etc. 27 Suite #270
City & State 23 Irvine, California	City & State 28 Irvine, California
Zip / Country 24 92714 / 25 USA	Zip / Country 29 92714 / 30 USA

4. FEI Number: 65-0438491 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MOORE, BRIAN R
2502 ROCKY POINT DR.
SUITE 862
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name: Barnett, Bolt, Kirkwood & Long
ATTN: Charles A. Carlson
82 Street Address (P.O. Box Number is Not Acceptable): 601 Bayshore Blvd.
83 Suite #700
84 City: Tampa FL 85 Zip Code: 33606

11. Pursuant to the provisions of Sections 607.1502 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 607.1505, Florida Statutes.

SIGNATURE: [signature] Charles A. Carlson 4/11/95
Signature of new or former registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	11 TITLE	PST	☒ Change ☐ Addition
NAME	MOORE, BRIAN R	12 NAME	Moore, Brian R.	
STREET ADDRESS	2505 ROCKY POINT RD., STE. 862	13 STREET ADDRESS	4110 River Avenue	
CITY-ST-ZIP	TAMPA FL	14 CITY-ST-ZIP	Newport Beach CA 92663	
TITLE	V	21 TITLE	V	☒ Change ☐ Addition
NAME	CUNNINGHAM, CRAIG A	22 NAME	Cunningham, Craig A.	
STREET ADDRESS	2502 ROCKY POINT DR., STE. 862	23 STREET ADDRESS	Recodo	
CITY-ST-ZIP	TAMPA FL	24 CITY-ST-ZIP	Irvine, CA 92720	
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: [signature] 4-10-95 (714) 442-7942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

020201 CP