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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000070695 (0)

1. Corporation Name

DADE TRADING COMPANY



Principal Place of Business

9750 S.W. 94 TERRACE
MIAMI FL 33176

Mailing Address

9750 S.W. 94 TERRACE
MIAMI FL 33176

2. Principal Place of Business

21 10621 N. KENDALL DRIVE

2a. Mailing Address

26 ~~STATE~~ 10621 N. KENDALL

Suite, Apt. #, etc.

22 SUITE # 203

Suite, Apt. #, etc.

27 SUITE # 203

City & State

23 MIAMI, FL

City & State

28 MIAMI, FL

Zip

24 33176

Country

25 USA

Zip

29 33176

Country

30 USA

9. Name and Address of Current Registered Agent

MARTIN, RICHARD M
9750 S.W. 94 TERRACE
MIAMI FL 33176

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 607.0502 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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent Signature required when for relocation)

Date

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

P MARTIN, RICHARD ☐ DELETE

9750 SW 94 TR

MIAMI FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

T MARTIN, WINSOME ☐ DELETE

9750 S.W. 94TH

MIAMI FL

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

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TITLE NAME STREET ADDRESS CITY-STATE-ZIP

☐ DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD MARTIN

3/1/96

305-271-2635

CR2E034 (12/95)