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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000070695 (0)

DADE TRADING COMPANY

Principal Flace of Busionss Mailing Address

10621 N KENDALL DRIVE 10621 N KENDALL DRIVE
SUITE 203 SUITE 203
MIAMI FL 33176 MIAMI FL 33176-1530

FILED Apr 14 1997 8:00am Secretary of State



SUITE 203 MIAMI FL 3317 US	8	SUITE 203 MIAMI FL 33176-1530 US		s. Date Incorporated or Qualified 10/04/1993	3a. Date of Last Report 04/08/1996
2. Principal Pr	ace of Business	2a. Mailing Address	Λ	4. FEI Number	Applied For
21 1000	1 N. KENDALL M.	26 Some a	> Business	65-0445170	Not Applicable
Suite, Apt	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	ful FL	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
1331	76 25 U.S.A	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes	intangible tax under s. 199.032, Yes
	Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
	RTIN, RICHARD M		81 Name		
) S.W. 94 TERRACE		82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)
MIAI	MI FL 33176		-2-		
			83	•	
		•	84 City		85 Zip Code
				poration submits this statement for the p	FL 63 245 0000
office or r agent 1 a SIGNATURE	egistered agent, if: both, in the State on the state of the control of the contro	f Florida, Such change was a cost of, Section 607.0505, Flo	authorized by the corpora prida Statutes.	tion's board of directors. I hereby accep	(/8/97
	So your vie it paid by printed harderst registered agent		E: Registered Agont signature requ		/ DATE/
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
TIFLE	MARTIN, RICHARD	ר"ו מנננינ			C change C rasses.
NAMÉ	9750 SW 94 TR		1.2 NAME		
STREET ADDRESS	MIAMI FL		1.3 STREET ADDRESS		
City St 7iP	MUMIFE	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
1)11(1	MARTIN, WINSOME	L Otta.ic	2.2 NAME		
NAME A total a transporter	9750 S.W. 94TH		2.3 STREET ADDRESS		
STREET ADORESS	MIAMI FL		2. 4 CITY-ST-ZIP		
CHY-ST ZIP TIDLE	1210-11-11 1 2-	DELETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CHY S1-70		•	3.4. CITY - ST - ZIP		
THE		DELETE	41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST 7#			4 4 CITY-ST-ZIP		
TILE		DELETE	51 TITLE		Change Addition
NAM			52 NAME		
STREET ACCORESS			5.3 STREET ADDRESS		
CITY - S1 - 7(2)			5.4 CITY-ST-ZIP		
100		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-76			6 4 CITY-ST-ZIP		
Maria Indonesia	har end by that the information graphed	with this filing does not quali		d in Section 119.07(3)(i), Florida Statute	as. I further certify that the

4. I do hereby ccrl ly 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 of 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 changes for an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/8/97 305.271. X35