**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000070695

DADE TRADING COMPANY

Principal Place	of Business	Mailing Address					
10621 N KENDA	LL DRIVE	10621 N KENDALL DRIVE					
STE 220		STE 220			DO NOT WEST IN THE SPICE		
MIAMI FL 33176		MIAMI FL 33176			DO NOT WRITE IN THIS SPACE		
US					Date Incorporated or Qualifed		- \
					10/04/1993	7 1 - 0 -	_
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Applied For	4
21		26			65-0445170	Not Applicabl	<u>e</u>
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		27			S. Schalasto J. Tallia	Fee Required	_
- City & State -		- City & State		• -	6, Election Campaign Financing.	. <b>\$5.00</b> May Be	ļ
23		28			Trust Fund Contribution	Added to Fees	_
Zip Country		Zip	Country	,	<ol><li>This corporation owes the current year Intal</li></ol>		
24	25	29 30	0		i dischar reporty rust.	☐ Yes ☐ No	_
i 1	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registered A	gent	_
			81	Name			- 1
MARTIN, RICHARD M			82	Ctroot	Address (B.O. Box Number is Not Acceptable)		$\dashv$
1062	1 N. KENDALL DR		62	Street	Address (P.O. Box Number is Not Acceptable)		
SUITE 220			83				ヿ
MIAMI FL 33176							
			84	City	FL	85 Zip Code	
				<u> </u>		hanging its registered	-
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 office Statutes of Florida, Such of Statutes of Florida, Such of Statutes of Florida, Statutes of Fl							
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutés.							
SIGNATURE	Signature, typed or printed name of registered	d agent and title if grolicable (NOTE: R)	anA heretzine	nt signatura n	equired when reinstating) DATE		
12.		S AND DIRECTORS	13.	in organization	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	_
TITLE	P	☐ DELETE	1.1 TITLE		P	Change	on
1	MARTIN, RICHARD	<del>_</del>	1.2 NAME		RICHAMA MANTA	$\Delta$	1
NAME	9750 SW 94 TR			TADDRESS	10621 N. KENDALL Dr.	50/17E320	
STREET ADDRESS						00716.220	
CITY-ST-ZIP	MIAMI FL	T DELETE	1.4 CITY-5 2.1 TITLE	T-ZIP	MIAMI A. 33/76	☐ Change ☐ Additi	
TITLE							١
NAME	2.2 N		2.2 NAME				İ
STREET ADDRESS	. 238		2.3 STREE	TADDRESS			
CITY-ST-ZIP			2.4 CITY-	ST- ZIP			$\perp$
TITLE	* **	☐ DELETE -	3.1 TITLE	•		Change	on
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	TADORESS			ļ
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Additi	no
NAME			4. 2 NAME				Ì
STREET ADDRESS				TADORESS			
í			4.4 CITY-S				- 1
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	1-21		☐ Change ☐ Addit	ion
TITLE			5.1 TITLE 5.2 NAME				
NAME				T 4000505			- {
STREET ADDRESS	İ			TADORESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addit	On
NAME			6.2 NAME				

CITY-ST-ZIP 14. I 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

301-271.2635

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90031 023 \*\*\*150.00