## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham ... Secretary of Stale DIVISION OF CORPORATIONS

DOCUMENT #

P94000027052 (7)

FY TRADING, INC.

FILED	
Aug 18 1997 8:00an	n
Secretary of State	

Principal Plac	ce of Business	Mailing Address				4 4 <b>00</b> /4001 (10 40/4) <b>(10</b> /4)	<b>[ ]</b>			
160 SE 6TH AVE #B2 DELRAY BEACH FL 33483		160 SE 6TH AVE #82 Delray Beach Fl 33483	160 SE 6TH AVE #82 DELRAY BEACH FL 33483			DO NOT WRITE IN THIS SPACE				
US		US				3. Date Incorporated or Quali		te of Last Ri	•	
3 5 2 3 3 3 5 E						04/05/1994	08	/02/1996		
<del></del>	Place of Business	2a. Mailing Address				4. FEI Number			oplied For	
Suite, Apt.	# etc	<b>26</b>				65-0478258			ot Applicable	
22		27	27			5. Certificate of Status Desired Fee Required Fee Required				
City & Stat	le	City & State				6. Election Campaign Financi		\$5.00		
23	Country	28 7in	Country			Trust Fund Contribution		Added t		
Zip	Country 25	Zip 3	Country			<ol><li>This corporation owes or h Personal Property Tax due</li></ol>	· -		angible   ] No	
24	25   2. Name and Address of C		<u>o</u> l			10. Name and Address of Ne			7 140	
Ct	ARTER, CORT		81	Name						
	SO SE 6TH AVE				<u>tann</u>	vers Louis Mr.	ne Suxe	ca/		
10 #8			82			ss (P.O. Box Number is Not Acc	_			
	DE ELRAY BEACH €L 33483		83		40	SEPTINE UL	<u> </u>			
	SERVE DEVOLUE COLOR							<u> </u>		
	•	<b>/</b> 3	84	City	2010.	mi Rosel	FL	85 Zip (	Code Code	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida Statutes	the above		corpor	ation submits this statement for		changing it	s registered	
office or r	registered agent, or both, invitive	7.0502 dna 607.1508. Forida Statutes State of Torida. Such change was aut obligations of, Seoloh 607.0505, Florid	thorized by	the corp	poration	n's board of directors. I hereby	accept the appr	ointment as	registered	
	arit idilimilar with, and accounting	1	WVC/1	Low	o Kh	ing Birrai	8-12-	97		
SIGNATURE	Signature: shed it printed name of registi					when reinstating)	DATE	*********	<del></del>	
12.		RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO		DIRECTOR		
TITLE	10	DELETE.	1.1 TITLE			want & Ollower		☐ Change	Addition	
NAME			1.2 NAME		FRA	ANCES LOUISE WARE	, Buxten			
STREET ADDRESS	160 SE 6TH AVE #B2		1.3 STREET ADDRESS		160	55 GTW AUP 8-	7			
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CiTY-ST-ZIP		000	May BERH FL	33483			
TITLE	☐ DEFE.		21 TITLE			,		☐ Change	Addition	
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET ADDRESS							
CITY-ST-ZIP	<u></u>	☐ DELETE	2. 4 CITY-ST-ZIP		<del> </del>			Change	Addition	
TITLE		T" DETER						L Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET							
CITY-ST-ZIP	<del> </del> _	DELETE	3.4. CITY-ST-ZIP		┼	<u></u>		Change	Addition	
TITLE			4.1 TITLE					Criange	Addition	
NAME CZOCCZ ADDOCCO			4.2 NAME 4.3 STREET	ADDDECC						
STREET ADDRESS			1							
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-S 5.1 TITLE	1-215	+			☐ Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY-ST-ZIP			54 CITY-S							
TITLE		DELETE 6.1		<u> </u>	<del> </del>			Change	Addition	
NAME		_	6.2 NAME							
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY-S							
14. i do bere	by certify that the information su	upplied with this filing does not qualify	for the exe	mntion s	stated in	n Section 119.07(3)(i), Florida S	Statutes. I further	certify that	the	
information information in am an o	on indicated on this annual repo officer or director of the corporal in Block 12 or Block 13 if chang	or or experiemental annual report is trui from or his receiver or trustee empower year or on an attachment with an addre	e and accu led to exectess.	urate and aute this r	d that m report a	ly signature shall have the same as required by Chapter 607, Flo	e legal effect as orida Statutes; ar	if made und id that my n	der oath; that name	