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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400051226 (6)

FIRST IN TRADE USA, INC.

FILED Feb 23 1998 8:00am Secretary of State

A MACATAC IN IBUT ALON ACOM ACOM ACOM ACOM DIVENTIALE MAIN AND ACOM

1	ce of Business	Mailing Address		
7031 GRAND NATIONAL DR SUITE 110 ORLANDO FL 32809 US		7031 Grand National Dr Suite 110 Orlando fl 32809 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified
		••		07/07/1994
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number Applied For
21		26		59-3254768 Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution Added to Fees
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Curi		188	10. Name and Address of New Registered Agent
004014 440000 B				
856 SKY LAKE CIR. APT. D  82 Street Address (P.O. Box Number is Not Acceptable)				
	RLANDO FL 32809		703	GROND NATIONOL DR # 110
			83	
			84 City	lar   7in Code
		-	"   "   6	アにいか FL 85 Zip Code 32.819
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, the above-named	corporation submits this statement for the purpose of changing its registered
11. Pursuant to the provisione 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 or agent of Section 607.0505, Florida Statutes.				
SIGNATURE		Z { { } { } { } { } { } { } { } { } { }		2/10/98
	Signature typed or putted course of regenerated		E. Registered Agent signature	DATE.
12. TITLE	DEFICERS F	AND DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PLASTICS NT
NAME	CIGAGNA, MARCOS R	ב_ ז טוננונ	1.1 TITLE	
STREET ADDRESS	8204 CRYSTAL LAKE #160	nn	1.2 NAME	CIGAGNA, MARCOS R
CITY-ST-ZIP	ORLANDO FL 32809	<b>,</b>		7031 GRAND NATIONAL DR # 110
TITLE	\$	☐ DELETE	1.4 City - St - ZiP 2.1 Title	ORLANDO, FL 32819  SELECTORY DANGE Addition
NAME	CIGAGNA, MARCOS P		2.2 NAME	CIGAGNA, MARCOS P
STREET ADDRESS	856-D SKY LAKE CIR.			7031 GRAND NATIONAL DR #110
CITY-ST-ZIP	ORLANDO FL 32809		2. 4 CITY - ST - ZIP	ORGADD , FL 32819
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.5 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		T proces	4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	<u> </u>	DELETE	5.4 CITY-ST-ZIP 61 TITLE	Change Addition
NAME			6.2 NAME	L_J Change L_J Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADORESS	
CITY-ST-ZIP	Λ.			
14. I hereby c	ertify that the information supplied	with this filling does not qualify fo	6.4 CITY-ST-ZIP or 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 harver 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 all striment with an address.				