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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000055656 (0)

ISLAND TRADING & PURVEYORS, INC.

Principal Place of Business

Mailing Address

40072 W DIVIE LAW CHITE (

10077 W DIVIE LAWY CHITE 10

FILED May 15 1997 8:00am Secretary of State



NORTH MIAMI BEACH FL 33180			NORTH MIAMI BEACH FL 33180-2602						
						3. Date Incorporated or Qualified 07/27/1994	3a. Date of 08/09/1		eport
2. Principal F	lace of Business	2a. Mailing Ac	ldress			4. FEI Number	·		plied For
Suite, Apt	41 - 2-12.	26 Suite, Apt.	# oto			65-0507083	•		t Applicable
22		27]			******	5. Certificate of Status Desired		Fee Re	Additional equired
City & Stat	le .	City & Stat	e			6. Election Campaign Financing			May Be
23 Zip	Country	28 Zip	T	Country	,	Trust Fund Contribution 8. This corporation has liability for i			199 032
24	25	29	30	7			Yes No		. 199.002,
	g, Name and Address of Cu	rrent Registered Agen	t			10. Name and Address of New Re	gistered Ager	it	
	STICK, FRANK			81	Name				
18677 W DIXIE HWY SUITE 11					Street Add	ress (P.O. Box Number is Not Acceptab	le)		
NOI	rth Miami Beach FL 33180			83	· · · · · · · · · · · · · · · · · · ·				
				53	<u> </u>				
				84	City	-	FL 85	, Zip (Code
11. Puzsuant	to the provisions of Sections 607	0502 and 607 1508. Flo	orida Statutes, 1	the abov	e-named cor	poration submits this statement for the p		naina it	s registered
office or i	registered agent, or both, in the S	Itate of Florida, Such ch	ange was auth	orized b	y the corpora	poration submits this statement for the p ition's board of directors. I hereby accep	ot the appointm	nent as	registered
	in lammar with, and accept the o	physicins of, dection of	JANON I ,COCO. (C	a Olalule	э.				
SIGNATURE	Signature Typics or prime digrates of registers		(NOTE Re	gistered Ag	ent signature requ	red when reinstating)	DATE		
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC			
11111	DP FOATING	LJ	DELETE	1.1 TITLE			ا الــا	Change	Addition
NAME	BOSTICK, FRANK 18677 W DIXIE HWY SUIT	E 11		1.2 NAME					
STF:ET ADDRESS	NORTH MIAMI BEACH FL				ADDRESS				
Oly SI 2H Title	DS-		DELETE	1.4 CITY-S 2 1 TITLE	ST-ZIP			Change	Addition
NAME	ZANKI, JOHN	,	יטנגנוג	2.2 NAME	Ì		٠ اــــا	mango	//Odillon
STREET ADDRESS	-18677 W DIXIE HWY-GUIT	EMI DOLON	0.1		ADDRESS				
CITY - ST - ZIP	NORTH MIAMI BEACH FL		15	2 4 CITY-	1				
NIGF			DELETE	3.1 TITLE	01 11			Change	Addition
NAME				3.2 NAME	1				
STREET ADDRESS			i	3.3 STREE	I ADDRESS				
City: \$4 - Zit				34 CITY-	ST-ZIP				
7111.8			DELETE	4 1 TITLE				Change	Addition
NGM	į		į	4. 2 NAME	Ĺ				
STREET ACORESS					r address				
C:T+-S1-7IF			DELETE	4.4 CITY - 1	ST-ZIP		······································	Dhaz : :	1 4 4 100
THUE		LJ	DELETE	5.1 TITLE			Ц	Change	Addition
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	ì				
OLA 21 SE TUTE			DELETE	5.4 CITY-1 6.1 TITLE	SI · ZIP		П	Change	Addition
NAME			OLLLIL	6.2 NAME	ļ		، تب	ernari y o	L. AUGINON
NAME STREET ALORESS				6.3 STREE	T ADODECC				
CHY-ST ZIE	1			64 CITY-3	51-Z#P				

14. I do hereby certify that the information supplied with this filling 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 B

SIGNATURE:

0244377