

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000056402 (8)

1. Corporation Name

ACTION INTERNATIONAL TRADING, INC.

Principal Place of Business

Mailing Address

772 N.W. 57TH CT.  
FT. LAUDERDALE FL 33309

772 N.W. 57TH CT.  
FT. LAUDERDALE FL 33309



2. Principal Place of Business		2a. Mailing Address	
21 1500 SW 5th ct	26 1500 SW 5th et		
Suite, Apt. #, etc		Suite, Apt. #, etc	
22 F		27 F	
City & State		City & State	
23 POMPANO BEACH - FL		28 POMPANO Bch - FL	
Zip	Country	Zip	Country
24 33069	25 USA	29 33069	30 USA

3. Date Incorporated or Qualified	3a. Date of Last Report
07/29/1994	07/20/1995
4. FEI Number	Applied For
65-0513906	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHAFFER, KENNETH S  
2130 N.E. 53RD ST.  
FT. LAUDERDALE FL 33308-3137

81 Name	EDSON F. PAGOTTO
82 Street Address (P.O. Box Number is Not Acceptable)	127 CENTENNIAL CT
83	P
84 City	POMPANO Bch - FL
85 Zip Code	FL 33073

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 change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Edson Pagotto* - EDSON PAGOTTO

Signature of person named as registered agent and title if applicable

(If Not Registered Agent, signature required when not registered)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	
NAME	PAGOTTO, EDSON	1.2 NAME	
STREET ADDRESS	772 N.W. 57TH CT.	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL 33309	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	
NAME	ALLISON, JULY	2.2 NAME	
STREET ADDRESS	970 N.E. 38TH ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL 33334	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/96

(954) 772-2540

CR2E034 (3/96)