PROFIT CORPORATION ANNUAL REPORT <b>1998</b>	Sandra Secret	ARTMENT OF STATE <b>B. Mortham</b> any of State CORPORATIONS	FILE Feb 04 1998 Secretary o	8:00am
OCUMENT # P9400 Corporation Name POWER TRADING INC.	0087971 (5	)		
ncipal Place of Business	Mailing Address			(BII) (UZID (GII) INNE) (ISI (UZI
75 FOUNTAINEBLEAU BLVD E IIAMI FL 33172 S	175 Fountainbleau ( 1e Miami FL 33172 Us	3LVD	DO NOT WRITE IN THI 3. Date Incorporated or Qualified 12/02/1994	S SPACE
Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #. etc.	26 Suite, Apt. #, etc.		65-0541631	Not Applicable
	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution      S. This corporation owes or has paid the c	Added to Fees
25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
PRIETO, DOUGLAS 5447 SW 150 CT				
MIAMI FL 33185		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
		83		
Pursuant to the provisions of Sections 607.05	02 and 607.1508, Florida Slatu	84 City	F	
NATURE Signature, typed or printed name of registured ag	pent and tille if applicable. (NC	ites, the above-named con authorized by the corpora lorida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	of changing its registered popintment as registered
NATURE Signature, hyped or printed name of registered ag	pent and tille if applicable. (NC	ites, the above-named con authorized by the corpora lorida Statutes. TE. Registered Agent signature requ 13.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	D DIRECTORS IN 12
NATURE Signature, typed or printed name of registured ag	pent and tille if applicable. (NC	ites, the above-named con authorized by the corpora lorida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	of changing its registered popintment as registered
INATURE Signature, typed or printed name of registered ag OFFICERS AN PD PRIETO, DOUGLAS tet ADDRESS 13439 S.W. 16TH LANE	pent and tille if applicable. (NC	ites, the above-named con authorized by the corpora lorida Statutes. TE. Registered Agent signature requ 13. 1.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	D DIRECTORS IN 12
INATURE Signature, typed or printed name of registared ag OFFICERS AN PD E PRIETO, DOUGLAS ET ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175	Perk and tille if applicable. (NC ND DIRECTORS	Ites, the above-named corr authorized by the corpora lorida Statutes. ITE. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Of changing its registered popointment as registered  ND DIRECTORS IN 12      Change Addition
NATURE Signature. hyped or printed name of registared ag OFFICERS AN PD PRIETO, DOUGLAS ET ADDRESS 13439 S.W. 16TH LANE MIAMI FL 33175 VPD	pent and tille if applicable. (NC	Ites, the above-named cor authorized by the corpora lorida Statutes. ITE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	C changing its registered oppointment as registered
NATURE Signature, typed or printed name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE MIAMI FL 33175 VPD PRIETO, MARIA AMPARO	Perk and tille if applicable. (NC ND DIRECTORS	Ites, the above-named corr authorized by the corpora lorida Statutes. ITE. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Of changing its registered popointment as registered  ND DIRECTORS IN 12      Change Addition
NATURE Signature. typed or printed name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE MIAMI FL 33175 VPD PRIETO, MARIA AMPARO ET ADDRESS 13439 S.W. 16TH LANE MIAMI FL 33175 ST- ZIP	Perk and tille if applicable. (NO ND DIRECTORS	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Of changing its registered popointment as registered      ND DIRECTORS IN 12      Change Addition      Change Addition
NATURE Stgnature. typed or printed name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO 13439 S.W. 16TH LANE 13439 S.W. 16TH LANE ST-ZIP MIAMI FL 33175 SD	Perk and tille if applicable. (NC ND DIRECTORS	Ites, the above-named corr authorized by the corpora lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Of changing its registered popointment as registered  ND DIRECTORS IN 12      Change Addition
NATURE Signature, typed or printed name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE SI-ZIP VPD PRIETO, MARIA AMPARO ET ADDRESS 13439 S.W. 16TH LANE PRIETO, MARIA AMPARO ST-ZIP MIAMI FL 33175 SD GINO, SABANAO C.	Perk and tille if applicable. (NO ND DIRECTORS	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Of changing its registered popointment as registered      ND DIRECTORS IN 12      Change Addition      Change Addition
INATURE Signature. typed or perified name of registered ag OFFICERS AN PD E PD PRIETO, DOUGLAS ET ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E ADDRESS 13439 S.W. 16TH LANE PRIETO, MARIA AMPARO ET ADDRESS SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE ST-ZIP MIAMI BEACH FL	Perk and Ule if applicable. (NC ND DIRECTORS DELETE DELETE DELETE	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change     Change     Change     Addition
INATURE Signature. typed or privined name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO E PRIETO, MARIA AMPARO 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE -ST-ZIP MIAMI BEACH FL	Perk and tille if applicable. (NO ND DIRECTORS	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Regesered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change     Change     Change     Addition
INATURE Signature. typed or privined name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO E PRIETO, MARIA AMPARO E SD E GINO, SABANAO C. E GINO, SABANAO C. E GINO, SABANAO C. E ADORESS 6422 COLLINS AVENUE -ST-ZIP MIAMI BEACH FL E	Perk and Ule if applicable. (NC ND DIRECTORS DELETE DELETE DELETE	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Regesered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change     Change     Change     Addition
INATURE Signature. typed or pretiod name of registered ag OFFICERS AN PD E PD PRIETO, DOUGLAS ET ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO ET ADDRESS SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE -ST-ZIP MIAMI BEACH FL E E ET ADDRESS	Perk and Ule if applicable. (NC ND DIRECTORS DELETE DELETE DELETE	Ites, the above-named cor authorized by the corpora lorida Statutes. TE. Regesered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change     Change     Change     Addition
INATURE Signature. typed or privined name of registered ag OFFICERS AN PD PRIETO, DOUGLAS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO E PRIETO, MARIA AMPARO 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE -ST-ZIP MIAMI BEACH FL	Perk and Ule if applicable. (NC ND DIRECTORS DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. TE. Registerid Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4. CITY-ST-ZIP 5.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change     Change     Change     Addition
INATURE Signature. typed or printed name of registrated ag OFFICERS AN PD PRIETO, DOUGLAS tet ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO E PRIETO, MARIA AMPARO E GINO, SABANAO C. E F ADDRESS 6422 COLLINS AVENUE ST-ZIP MIAMI BEACH FL E E F ADDRESS -ST-ZIP E E E	Perk and title if applicable. (NC ND DIRECTORS DELETE DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change Addition     Change Addition
INATURE Signature. typed or printed name of registrated ag OFFICERS AN PD PRIETO, DOUGLAS tet ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD E PRIETO, MARIA AMPARO E PRIETO, MARIA AMPARO E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE ST-ZIP E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Perk and title if applicable. (NC ND DIRECTORS DELETE DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change Addition     Change Addition
INATURE Signature. typed or privited name of registrated ag OFFICERS AN PD PRIETO, DOUGLAS tet ADDRESS 13439 S.W. 16TH LANE -ST-ZIP VPD E PRIETO, MARIA AMPARO E FADDRESS 13439 S.W. 16TH LANE SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE ST-ZIP MIAMI BEACH FL E E FADDRESS -ST-ZIP	Perk and title if applicable. (NC ND DIRECTORS DELETE DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. TE. Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 5.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change Addition     Change Addition
INATURE Signature. typed or printed name of registrated ag OFFICERS AN PD PRIETO, DOUGLAS EF ADDRESS 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 VPD PRIETO, MARIA AMPARO 13439 S.W. 16TH LANE -ST-ZIP MIAMI FL 33175 SD E GINO, SABANAO C. ET ADDRESS 6422 COLLINS AVENUE ST-ZIP E E E ET ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	Perk and bile if applicable. (NC ND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. ITE. Regetered Agent signature requires 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change Addition     Change Addition
Signature. typed or printed name of registrated ag         OFFICERS AN           E         PD           E         PRIETO, DOUGLAS           tet ADDRESS         13439 S.W. 16TH LANE           -ST-ZIP         MIAMI FL 33175           E         VPD           ct ADDRESS         13439 S.W. 16TH LANE           -ST-ZIP         MIAMI FL 33175           E         VPD           ct ADDRESS         13439 S.W. 16TH LANE           -ST-ZIP         MIAMI FL 33175           E         SD           ct ADDRESS         6422 COLLINS AVENUE           -ST-ZIP         MIAMI BEACH FL           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E           E         E	Perk and bile if applicable. (NC ND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	Ites, the above-named corr authorized by the corpora- lorida Statutes. TE. Regetered Agent signature rect 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST- ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.1 STREET ADDRESS 5.4 CITY - ST- ZIP 5.1 TITLE 5.1 STREET ADDRESS 5.4 CITY - ST- ZIP 6.1 TITLE	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap ulred when reinstaling) DATE	Change Addition     Change Addition