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

FILED

Sep 25 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUN 1. Corporation	MENT # P95000 NLLEY TRADING, INC.	0004530 (8)		T PROVIDEN ING PENGH RAYAN BRAHA BA	
Principal Place	of Business	Mailing Address		1 106111061 119 10101 01111 06111 91	INN BONN BONN ORINN DIJON BANGK ANNO BONA 1981
7300 W ÇAMII		7300 W CAMINO REAL			
	301	201			
BOCA RATON US	FL 33433	BOCA RATON FL 33433 US			RITE IN THIS SPACE
08		Uõ		3. Date Incorporated or Qualifi	
2. Principal Pi	ace of Business	2a. Mailing Address		01/18/1995 4. FEI Number	07/12/1996 Applied For
21 Suite		26 Suite	901	65-0571036	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22 2		27 20	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desireo	Fee Required
City & State	•	City & State		6. Election Campaign Financin	
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24]	25		30	Personal Property Tax due J	s paid the current year Intangible une 30. Tes No
24]	9. Name and Address of Curren		7	10. Name and Address of New	
SCHRAGER, DANIEL J 81 Name				mail Solar	aces
	91 PALM ISLAND DR		82 Street Addr	ress (P.O. Box Number is Not Acce	<u> </u>
WEST TOWER, SUITE 400			<u> 2019</u>	11 talm Is	skind D
800	CA RATON FL 33498		83 Pr	Parton	
			84 012	1 7 10 1	85 Zip Code
44 5	4	0 . 1007 1500 51 (1) 01-1		a konon	FL 🖺 🕏 🕏 ୯୯୩ ୫
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 Buch 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 triction 607.0505, Florida Statutes. SIGNATURE Signalure, types of printed wine of registered agent and title of applicable (NOTE Registered Agent signature required when reinstating) Daffe					
12.	Signature, typed or printed same of registered ago OFFICERS ANI		Rog-stored Agent signature require 13.		FFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	7.001.107.107.07.11.11.02.0 1.0 1.0	Change Addition
NAME	SCHRAGER, DANIEL		1.2 NAME		
STREET ADDRESS	7300 W CAMINO REAL, 114	-20l	1.3 STREET ADDRESS		
CITY-ST-ZIP	80CA RATON FL		1.4 CITY-ST-ZIP		
		☐ DELETE	2.1 TITLE		Change
NAME	•		2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		_ occur	3.2 NAME		E 1 reduitor
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		İ
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		L_ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		F) 01(1)	6.2 NAME		shorter notiful
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 City-St-Zip		
14. I do hereb	y certify that the information supplied		for the exemption stated		
I am an of	n indicated on this annual report or s ficer or director of the corporation or a Block 12 or Block 13 if Granged, w	the receiver or trustee empowe	red to execute this repor	t my signature shall have the same rt as required by Chapter 607, Flori	legal effect as if made under oath; that do Statutes; and that my name