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

May 22 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000014632 (0) INTERCO TRADING RESOURCES, INC. Principal Place of Business Mailing Address 7845 N.W. 66TH STREET 7845 N.W. 66TH STREET MIAMI FL 33166 MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 Not Applicable 65-0563244 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 $\overline{Z}_{\rm ID}$ Zip Country Country This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DINER, MANUEL Linda J. Camacho 141 N.E. 3RD AVENUE 82 SUITE 601 83 **MIAMI FL 33132** 84 City Zip Code Miami 33166 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 originations of Section 607.0505, Florida Statutes. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 11116 Change NAME VANN. VINCENT R 1.2 NAME 7845 N.W. 66TH STREET 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition 2 1 1/TLF TITLE CAMACHO, LINDA J 2.2 NAME NAME 7845 N.W. 66TH STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 City-ST-ZiP DELETE Change Addition TITLE 3 1 TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TiTLE Change Addition 4. 2 NAME NAME 4.3 STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CiTY - ST - 7(P DELETE Addition 5.1 TITLE TITLE 900002534 5.2 NAME NAME -05/26/98--01014 STREET ADDRESS 5.3 STREET ADDRESS ***150.00 CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition Change TITLE 61 TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with this filing 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 of 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 argothment with an address.

4/21/98

(305)597-5454

FILED