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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARIMENT OF STAT

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Apr 30 1997 8:00am

Secretary of State

A TRANSPERRIKE (ALBI ALINI BININ BANK BANK BANK BANK KIRIN KIRIN MARK AKIN KRANA KIRIN BANK KANA

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000022572** (8)

THE DIGITAL TRADER, INC.

Principal Place of Business 4418-LEE BLVD LEHIGH ACRES FL 33936 US	Maining Address 118 LEE BLVD LEHIGH ACRES FL 33936 US	1418 LEE BLVD LEHIGH ACRES FL 33936-4850					
				 Date Incorporated or Qualified 03/20/1995 		te of Last R 6/1996	teport
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		★ Ar	pplied f or
21 430 Lee Blvd.		r	26-5614330-65-076	1999	No.	ot Applicable	
Sulte, Apt. #, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired See Required \$8.75 Additional Fee Required			
City & State 23 Lehigh Acres, Fl.	City & State	the state of the s		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country	Zip	Count	у	8. This corporation has liability for	intangible	tax under s	. 199.032
24 33936 25 Lee	29	30		Florida Statutes Yes No			
9, Name and Address of C	current Registered Agent	8	T	10. Name and Address of New Re	gistered A	rgent	
ROSENTHAL, LOREN		°	Name				
203 E. JERSEY ROAD LEHIGH ACRES FL				ress (P.O. Box Number is Not Acceptal	ble)		
		8	3				
		8	1 City	· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
11. Pursuant to the provisions of Sections 60 office or registered agent, or both, in the			<u> L</u>			<u> </u>	
SIGNATURE LOREN ROSENTE Signature, typed or provided name of register	obligations of, Section 607.0505, F	lorida Slatute	05.	ned when roinstaing; ADDITIONS/CHANGES TO OFFI	apr	l26,	1447
TITLE PSTD	DELETE	1,1 Tillif		ADDITIONS/CHANGES TO OFFI	CERS AND	Change	Addition
NAME ROSENTHAL, LOREN		1.2 NAM6					
STREET ADDRESS 203 E. JERSEY ROAD		1	EL ADORESS				
CITY-ST-ZIP LEHIGH ACRES FL		1.4 C(1)	ST- ZIP				
TITLE	DELETE	2.1 7171.6				Change	Addition
NAME		2.2 NAME					
STREET ADDRESS		2.3 STRE	1 ADDRESS				
CITY-ST-ZIP	Lotter	2 4 CHTY	·			T Change	Addition
TITLE NAME	☐ DETE1E	31 TRLE 32 NAME				Change	
STREET ADDRESS			ET ADDRESS				
CHY-SI-ZIP		3.4 Cily					
TITLE	DELETE	4.1 TILLE	01 211			Change	Addition
NAME		4. 2 NAM	f				
STREET ADDRESS		4.3 STRE	1 ADDRESS				
CITY-ST-ZIP		4.4 CITY	ST-ZIP				
TITLE	DELFTL	5.1 TITLE				Change	Addition
NAME		5.2 NAME		•			
STREET ADDRESS		5 3 STHE	ET ADDRESS				
CITY-SI-ZIP		5.4 CITY-					
TITLE	DETEJE	61 TITLE				Change	☐ Addition
NAME		6.2 NAME	- 1				
STREET ADDRESS		6.3 STREE	1 ADDRESS				

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 Statules. 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 receives or trector empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 13 if charges or on an attachment with an address.