

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

FILED

Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000025109 (6)**

1. Corporation Name
MRT TRADING, INC.

Principal Place of Business

**7061 GRAND NATIONAL DR
107C
ORLANDO FL 32819
US**

Mailing Address

**7061 GRAND NATIONAL DR
107C
ORLANDO D 32819
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 7316 INTERNATIONAL DR		26 7316 INTERNATIONAL DR.		03/27/1995	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	
23 ORLANDO FL		28 ORLANDO FL		65-0577666	
24 32819		29 32819		Applied For	
Country		Country		Not Applicable	
5. Certificate of Status Desired		6. Election Campaign Financing		8. This corporation owes or has paid the current year Intangible	
<input type="checkbox"/>		<input type="checkbox"/>		Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
\$8.75 Additional Fee Required		\$5.00 May Be Added to Fees			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
TORRES, MAX R 5850 LAKEHURST DRIVE SUITE 205 ORLANDO FL 32819				81 Name TORRES, MAX R.	
				82 Street Address (P.O. Box Number is Not Acceptable) 13231 LUXBURY LOOP	
				83	
				84 City ORLANDO	
				85 Zip Code FL 32837	

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

Max Torres

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	PSD
NAME	TORRES, MAX R	1.2 NAME	TORRES, MAX R.
STREET ADDRESS	5850 LAKEHURST DRIVE SUITE 205	1.3 STREET ADDRESS	13231 LUXBURY LOOP
CITY-ST-ZIP	ORLANDO FL 32819	1.4 CITY-ST-ZIP	ORLANDO FL 32837
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		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 hereby 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 or 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 attachment with an address.

SIGNATURE:

Max Torres

Feb 20 1998 (402) 858-0936

CR2E034 (10/97)