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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

May 09 1997 8:00am

Secretary of State

## DOCUMENT # P95000026697 (9)

ORION TRADE AND HOLDING INC.

Dringing Bloom	o of Dunings		ilino Addrono	<b></b>			
Principal Place of Business 7925 N.W. 12TH ST., SUITE 324 MIAMI FL 33126			Mailing Address 7925 N.W. 12TH ST., SUITE 324 MIAMI FL 33126-1822				
							3. Date Incorporated or Qualified
	lace of Business		Mailing Address				4. FEI Number Applied For
21			26				APPLIED FOR 65 - 058360 Not Applicable
Suite, Apl. #, etc.			Suite, Apt. #, etc.				<b>5.</b> Certificate of Status Desired
City & State			City & State				6. Election Campaign Financing \$5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip	Country		Zφ Country				8. This corporation has liability for intangible tax under s. 199.032,
24	25	29		30	30		Florida Statutos Yes No
	9. Name and Address of Curre	nt Regist	ered Agent				10. Name and Address of New Registered Agent
	ELU, HEBER				81	Name	<u>,</u>
	N.W. 12TH ST., SUITE 324				82	Street	et Address (P.O/Box Minher is Not Acceptable)
· MIAN	MI FL 33126				83	··•	· · · · · · · · · · · · · · · · · · ·
					84	City	FI 85 7ip Code
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 acceptable obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE 1							4/30/9 /
12.	Signature, typed of priffied name of registered as OFFICERS AN				ered Age 3.	nt signature	ure required when revistating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	ND CALL	DELETE		3. 1701E		Change Addition
NAME	MICELLI, HEBER				2 NAME		
STREET ADDRESS	7925 N.W. 12TH ST., SUITE 3	324	1.3 STREET ADORESS			ADORESS	s
CITY-ST-ZIP	MIAMI FL 33126			12	4 CHY-\$	1-21P	
TITLE	<del></del>		DELETE	2.	1 TITLE		Change Addition
NAME					2 NAME		
STREET ADDRESS				1		ADDRESS	S
CITY-ST-ZIP TITLE	• • • •		DETETE		. 4 CHY - 9 .1 THLE	51 - Z(F	Change Addition
NAME			L.J DETER		2 NAME		Unango L. Nulliton
STREET ADDRESS						ADDRESS	s
CITY-ST-ZIP					4. CHY- 9		
TITLE			DELETE		1 TITLE		Change Addition
NAME				4.	2 NAME		
STREET ADDRESS				4.	3 STREET	ADDRES\$	s
CITY-ST-ZIP			n nama	****	4 CITY-S	1-7if	
TITLE			☐ DELETE		1 TITLE		L Change L Addition
NAME OTREST (ODDSO)					2 NAME	40.00.000	
STREET ADDRESS						ADDRESS	S
CITY-ST-ZIP TITLE		**	DELETE	44.19	4 CITY-S 1 TITLE	1 - ZIP	Change Addition
NAME			seed at a confe		2 NAME		Side the state of
STREET ADDRESS						ADDRESS	s
1	}						

14. I do 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

n attachment with an address