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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000038355 (0)

BMA TRADING CORP.

FILED Jan 21 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 23314 S.W. 54TH WAY. SUITE C BOCA RATON FL 33433 80CA RATON FL 33433-7321								
					1	rated or Qualified	3a. Date of Last F	ieport
• Oringinal D	Dan of Chairman	2a. Mailing Address			05/12/1999 4. FEI Number	<u> </u>	04/18/1996	
2, Principal r	lace of Business	28. Mailing Address	•		65-05808	47	 	oplied For ot Applicable
Suite, Apt.	#. elo	Suite, Apt. #, etc	<u> </u>	· · · · · · · · · · · · · · · · · · ·	00 00000		<u> </u>	Additional
⊢		27	—		5. Certificate of	Status Desired	7	equired
City & Stat	8	City & State			6. Election Cam	paign Financing	\$5.00	May Be
23		28			Trust Fund Co			to Fees
Zip	Country	Zip	Country		1	ion has liability for int		199.032
24	25	29	30		Florida Statut		Yes No	
	g. Name and Address of Curr	ent Hegistered Agent	81	Name	10. Name and A	ddress of New Regi	awrea Agent	,
	SINGER, JAY		82					
23314 S.W. 54TH WAY, SUITE C BOCA RATON FL 33433				Street Add	t Address (P.O. Box Number is Not Acceptable)			
BO	DA RATUR EL 30430		83		<u> </u>			
Į			<u></u>				···	
1			84	City			FL 85 Zip	Code
11. Pursuant office or a agent. Fa	to the privisions of Sections 607/0 egistere tayen, or both, in the second the both familia with and accord the both	5 12 and 607.1508, Florida in of Florida: Such change inations of, Section 607.050	Statutes, the abov was authorized by 05, Florida Statute	e-named cor	poration submits this ation's board of direct	statement for the pur ors. I hereby accept	rpose of changing i the appointment as	ts registered registered
SIGNATURE	Signature, typera a non-charges visual		(NOTE Registered Ag	ent signature requ			112197 DATE	
12.	PTD CFICERS A	AND DIRECTORS DELET	13.			HANGES TO OFFICE		
TITLE	ADATO, BARBARA M	I DEFE	,		sarbara (Pelsinger	Change	L.J Addition
NAME CINCEL ADODESC	23314 S.W. 54TH WAY, SUI	TE C	1,2 NAME 1,3 STREET	ADDOCCC	sarbora.			
STREET ADDRESS	BOCA RATON FL 33433	11.0	1,3 STREET	1				}'
CITY-ST-ZIP TITLE	VSD	☐ DELET		01-217			☐ Change	Addition
NAME	PELSINGER, JAY S	tal once.	2.2 NAME					
STREET ADDRESS	23314 S.W. 54TH WAY, SUI	TE C	2.3 STREE	ADDRESS			/ 4 ×	ĺ
CHTY-ST-ZIP	BOCA RATON FL 33433		2. 4 CITY-				. •	
TITLE		DELET		· · · · · · · · · · · · · · · · · · ·			☐ Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	ADDRESS				
CITY - ST - ZIP			3.4. CITY-	ST-ZIP				
TITLE		DELET	E 41 TITLE				Change	Addition
NAME			4 2 NAME					. \
STREET ADDRESS			4 3 STREE	ADDRESS				
CITY - ST - ZIP			4.4 CiTY-1	ST-ZIP				
TITLE		DELET	E 5.1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	ADDRESS				
CITY-ST-7IP			5.4 CITY - 1	ST - ZIP				
TITLE		☐ DELET	E 6.1 YHTLE		·		Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY -	ST- ZIP				!

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 appears in Block 12 or plock 13 if changed or on an attachment with an address

SIGNATURE

GOLDATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/97 (561) 487-4559