## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000066989 (1)

DOCUI	MENT # <b>P950</b>	00066989	(1)		
•	OPMENT TRADING, INC.		•		
	_			1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Place of Business Mailing Address				t indition the island state of the second desired	#SKIL BRIDE BILLE BOLLE JOINT (61) (64)
351 LAKEVIEW DRIVE #201 351 LAKEVIEW DRIVE   FORT LAUDERDALE FL 33326 FORT LAUDERDALE FL					
				3. Date Incorporated or Qualified 08/30/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address	S	4. FEI Number	Applied For
21		26		65-060930	
Suite, Apt. a	Suite, Apt. #, etc. Suite, Apt. #, etc.		tc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State		City & State		Election Campaign Financing	\$5.00 May Be
<b>23</b>   Zip	Country	28   Zip	Country	Trust Fund Contribution  8. This corporation has liability for in	Added to Fees
24	25	29	30	Florida Statutes Yes	
	g. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent
DDOAM	^ EE110E		81 Nan	me	
PROANO, FELIPE 351 LAKEVIEW DRIVE #201			82 Stre	et Address (P.O. Box Number is Not Acceptable	<b>a</b> )
FORT L	AUDERDALE FL 33326		83		
			84 City	,	FI 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.05	02 and 607.1508, Florida 5	Statutes, the above-named	corporation submits this statement for the purp	acon of changing its societared office
or registere familiar with	ed agent, or both, in the State of Fic h, and accept the obligations of, Se	rida. Such change was au ction 607.0505, Florida Sta	thorized by the corporation tutes.	n's board of directors. I hereby accept the appo	ntment as registered agent. I am
SIGNATURE	Signature, typed or printed name of registered ago	ant and title if englishing	(NOTE: Registered Agont signatu		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS IN 12
TITLE	DP	☐ DELETE		70011010001311000100010	Change Addition
NAME	PROANO, FELIPE		1.2 NAME		_ ,
STREET ADDRESS	351 LAKEVIEW DRIVE #20		1.3 STREET ADDRES	ss	
CITY-ST-ZIP	FORT LAUDERDALE FL 33	326	1.4 CITY - ST - ZIP		
TITLE	DS	☐ DEFELE	2. 1 TITLE		Change Addition
NAME	PICHARDO, LISSETE		2.2 NAME		:
STREET ADDRESS	693 RACQUET CLUB ROAL		2.3 STREET ADDRES	SS	
CITY-\$1-ZIP	FORT LAUDERDALE FL 33	· · · · · · · · · · · · · · · · · · ·	2 4 CHTY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME CTOCCT ADODECO			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRE	SS	
CITY-ST-ZIP TITLE		DELETE	3.4 CHY-ST-ZIP 4.1 TITLE		
NAME		□ becen	4.2 NAME	ĺ	Change Addition
STREET ADDRESS			4.3 STREET ADDRES		
CITY-SI-ZIP			4.4 CITY-ST-ZIP	55	
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRES	is	
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRES	s	
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
T#4. TOO Dereby	r cerury inat ine information supplied	i with this tiling is valuntarik	turnished and done not a	vialify for the exemption stated in Contine 110.0	ZOME CITATION CONTRACTOR OF THE PARTY OF THE

rou mereuy certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OF PRINCES WAME OF SIGNING OFFICER OF DIRECTOR

Daytime Phone #