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

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COF ANNU	PROFIT RPORATION JAL REPORT 1997	FLORIDA DEPARTI Sandra B. Secretary DIVISION OF CO	Mortham of State	=	.997 8:00am ary of State	
DOCUMENT # P9500078032 (6) ROKS TRADING, INC. Principal Place of Business 10315 SW 89TH PLACE STE. 301 MIAMI FL 33176 MIAMI FL 33176						
				3. Date Incorporated or Qualified 10/11/1995	3a. Date of Last Report 08/02/1996	
2. Principal P	lace of Business NW 79 Ave	2a. Mailing Address 26		4. FET Number 65-0620034	Applied For Not Applicable	
Suite Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 30 City & Stat		City & State			Fee Required	
23 1 1 1	<i>~</i> (28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
zip' 24 331	76 25 USA	7ip 3	Country	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes \[\] No	
	9. Name and Address of Current I UCHA, L. M	Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
% A 1944 HOL	TKINSON,DINER,STONE & MANKU 8 TYLER STREET LYWOOD FL 33022-2088		83 84 City	Address (P.O. Box Number is Not Acceptal	FL 85 Zip Code	
agent. I a	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of im familiar with, and accept the obligation	and 607.1508, Florida Statutes Florida Such change was aut ons of, Section 607.0506, Florid	, the above-named horized by the corp da Statules.	corporation submits this statement for the poration's board of directors. I hereby acce	purpose of changing its registered pt the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent			required when reinstating)	DATE	
12.	OFFICERS AND I	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition	
NAME STREET ADDRESS	BAJOS, ORLANDO L 10325 SW 89TH CT. MIAMI FL 33176	L) with	1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP	PRESIDENT ORLANDO L. BAJOS 10315 SW 89 PL. SU MIAMI, FL 33176	77 301 E	
CITY-ST-ZIP TITLE NAME STREET ADDRESS	Wilson I E COTTO	OTTETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	7,	Change Addition	
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TITLE NAME STREET ADDRESS		[] DELFTE	5.4 CITY-S1-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Addition	
CITY-ST-ZIP	and the information	Mal al in 61	64 CITY - ST - ZIP	total in Conton 110 07/9/// Floride Claude	a Lifering and its that the	

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 Block 13 if changed, or on an attachment with an address.