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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

INTER-USA TRADING CORP.

DOCUMENT #  1. Corporation Name	P95000078973	(1
	P95000078973	(

Principal Place of Business	Mailing Address	
151 S.E. 15TH ROAD 3-X11 NW APT. 2702 MINIMI FL 33129 MASCUAN	23 14 2.T 151 S.E. 151H ROAD FI 33 14 2 APT. 2202 MIANT FL 33129	Same



3a. Date of Last Report

3. Date Incorporated or Qualified

				10/13/1995	
	ace of Business	2a. Mailing Address		4. FEI Number	. Applied For
	NW 24 TH ST		15th St	65-0620072	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	mi Fl	City & Stale  28 Mani, Fl		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp 24 2114	Country 25 65 A	Zip	Country	8. This corporation has liability for intangible Florida Statutes Yes 🕅 Yo	tax under s 199.032,
24 631	9. Name and Address of Cur		O VSA	Florida Statutes Yes Mo  10. Name and Address of New Registere	A Agant
			81 Name	10. Harro and Address of New registere	u Agent
DOCK	FORD, ARNOLD				
	EVILLA AVE.		82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE			83		
	L GABLES FL 33134				
			B4 City	<b>F</b>	85 Zip Code
tamiliar wii SIGNATURE	ed agent, or both, in the State of F th, and accept the obligations of, S Signature, typed or printed name of registred a	ection 607.0505, Florida Statutes.	by the corporation's boa	rd of directors. I hereby accept the appointment	as registered agent. I am
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D, <b>S</b>	□ DELETE	1 1 TITLE	eny kosiac (V)	Change Addition
NAME	GARCIA, JOSE A		12 NAME	\$20 S. Treasure Dr. 4	£ 402
STREET ADDRESS	151 S.E. 15TH RD APT.	2702			s3i4T
CITY-ST-ZIP	MIAMI FL 33129		14 CHY-ST-ZIP		•
TITLE	V. P.	DELFTE	2 1 TITLE	A. barcia (5)	Change Addition
NAME	Kerry KoziAL	e Dr. #402	2.2 NAME	51 SE 15th Rd AP	4. 2702
STREET ADDRESS	1820' S. Treasu	(13214)	2.3 STHEET ADDRESS	hiam; \$1 33/29	
CITY-ST-ZIP TITLE	N. Bay Village,	T DELETE	24 CHY-SY-ZIP 2 3 1 THE	A mart   44 x > 1 m /	☐ Change ☐ Addition
NAME		LJ occin	3 2 NAME		☐ Change ☐ Addition
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-S1-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	0000018384	FOO
TOTLE		DELETE	6 1 TITLE	-05/24/9601035	Orange Addition
NAME			6.2 NAME	***200 <b>.</b> 80	51,
STREET ADDRESS			6.3 STREET ADDRESS		1'10/

STREET ADDRESS
CHY-SI-ZIP

14. I do hereby 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:

\*\*CONTROL OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR\*\*

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CR2E034 (12/95)