## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000082265 (6)

TRADE WAY OF SOUTH FLORIDA, INC.

FILED

97 OCT -9 AM 9: 47

SECKLIMENT OF STATE TALLARMISSES, FLORIDA



Principal Place of Business Mailing Address 4801 S. UNIVERSITY DR. 4801 S. UNIVERSITY DR. SYS 305E DAVIE FL 33328 DAVIE FL 33328 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 3a. Date of Last Report 10/24/1995 4. FEI Number 10/28/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0624572 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PHILLIPS, SHELDON L Name 4801 N UNIVERSITY DR #232 Street Address (P.O. Box Number is Not Acceptable) **DAVIE FL 33328** 83 84 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 accept the obligations of, Section 607.0505, Florida Statules. Signature, typed or printed name of registered agent and bite if applicable (NOTE Registered Agent signature required when relistating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 4/97 DELETE TITLE 1.1 TITLE Change Addition FAZZOLARE, MICHAEL NAME 1.2 NAME 500002320645---10/15/97--01042--019 CR2E034 10261 SW 12 STREET STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33025 CITY-ST-ZIP 1.4 C/TY - ST - 7/P \*\*\*\*165.00 DELETE TITLE 21 11116 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE Change 3.1 TOLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 41 THLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELFTE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME St 10-14-97 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-S1-ZIP DELETE TITLE 6.1 THLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY- \$1-7IP

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 eath; 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.

(2)

To whom it may concern,

The reason that the Trade Way annual report was not sent in on time is because of a major problem I was having receiving my mail at the building I rent space from. Due to substantial down sizing I have changed offices Five times. Sorry for any inconvenience.

Thank You,

Mike Fazzolare