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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000083397 (6)

ANTA TRADING CORPORATION Principal Place of Business Mailing Address 443 N.E. 195TH ST. 443 N.E. 195TH ST. #342 N MIAMI BEACH FL 33179 N MIAMI BEACH FL 33179-3369 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1996 10/31/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0617395 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Z_{1D} 8. This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TAVAREZ, ANIBAL J 443 N.E. 195TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 #342 83 N MIAMI BEACH FL 33179 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, 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 Statutes. Stignutine type for printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 12. DPTD DELETE 1.1 TITLE Change ___ Addition THE TAVAREZ, ANIBAL J NAME 1.2 NAME CR2E034 % 443 N.E. 195TH ST. #342 STREET ADDRESS 1.3 STREET ADDRESS N MIAMI BEACH FL 33179 1.4 CITY-ST-ZIP CHY-ST-7P SVD DELETE Change Addition THLE 21 TITLE DIPLAN, RAMON N 2.2 NAME 9701 S.W. 16TH COURT STREET ADDRESS 23 STREET ADDRESS PEMBROKE PINES FL 33025 2. 4 CITY - ST - ZIP City - \$1 - 201

64 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 suppliemental 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME 5.3 STREET ADDRESS

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

3 3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY - ST-2IP

5.4 CITY-ST-ZIP

34. CITY-ST-ZIP

| SIGNATURE: A | SIGNATURE: | X |
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TITLE

NAME

Table

NAME

THEF NAME

HILE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ALIDRESS CITY - ST- ZIP

STREET ADDRESS

CITY - S1 - Z0

CITY - ST - 713

IGNATURE AND TYPED OR PHINDED NAME OF BIGMING OFFICER OR DIRECTOR

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654-7883 Devide Phone #

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Apr 21 1997 8:00am

Secretary of State

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