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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000088063 (9)

HIT TRADING COMPANY

Principal Place 48 E. FLAGLER #198 MIAMI FL 3313	STREET	Mailing Address 10421 SW 157 PLACE APT, 202 MIAMI FL 33196-3684	10421 SW 157 PLACE APT. 202				
					3. Date Incorporated or Qualified 11/16/1995	3a. Date of Last F 11/01/1996	Report
2. Principal Pi	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0622955	 	pplied For lot Applicable
Suite, Apt :	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional teguired
City & State	!	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Ζίρ 24	Country 25	Zip 29	Country 30			Yes No	в. 199.032,
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re	gistered Agent	
	CLUNG, ROSE MARY F		61	Name			
10421 S.W. 157 PLACE, APT. 202			82 Street Address (P.O. Box Number is Not Acceptable)			····	
MIAI	MI FL 33196		83				
			0.3				
			84	City		FL 85 Zip	Code
office or re agent I ar SIGNATURE	egistered agent, or both, in the S m familiar with, and accept the ol	tate of Florida Such change was as bigations of, Section 607,0505, Flor	uthorized by rida Statutes VENT	the corpo	orporation submits this statement for the pration's board of directors. I hereby acce	or 1/29/97	its registered s registered
12.	· · · · · · · · · · · · · · · · · · ·	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
Tille	Р	DELETE	1.1 TITLE			Change	Addition
NAME	MC CLUNG, ROSE MARY		1.2 NAME	}			
STREET ADDRESS	150 S.E. 2ND AVENUE #1	102	1.3 STREET	ADDRESS			
CITY - ST - ZIP	MIAMI FL 33131	☐ DELETE	14 CITY-S	7-ZIP		Change	Addition
TIFLE			21 TITLE			fill custific	MODEOU
NAME CLOSE LA LOGGE CO			2.2 NAME	ADDDECC			
STREET ADDRESS			2.3 STREET				
CITY ST-ZIF	DELETE		2. 4 CITY - 3.1 TITLE	11- ZIP		Change	☐ Addition
NAME.			3.2 NAME			_ •	_
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIF			3.4. CITY-	ST-ZIP			
TITLE	☐ DELETE		4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME	İ			
STREET ADDRESS			4.3 STREET	ADDRESS			
City - St - ZIP		T or ste	4.4 CITY-S	T-ZIP		[] 65	Addition
THTLE		[_] DELETE	5.1 TITLE		*	☐ Change	☐ Addition
NAME			5.2 NAME	IDDATES			
STREET ADDRESS			5.3 STREET 5.4 CITY-S	ŧ			
CITY - S1 - ZIP		DELETE	61 TITLE	, - LSF		☐ Change	Addition
NAME		<u></u> · ·	6.2 NAME		•	_ •	
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIF			6.4 CITY - 5	1			
14. I do heret informatio I am an ol	rí indicated on this annual report flicer or director of the corporatio	or supplemental annual report is tri	ue and accu pred to exec	ırate and ti	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lego port as required by Chapter 607, Florida S	al effect as if made ur	nder oath; tha

SIGNATURE: