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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 005841 (7)

FILED Apr 21 1998 8:00am Secretary of State

	ER TRADING, CORP.	30000041 (r			
Principal Place of Businoss Mailing Address 5400 S. UNIVERSITY DR #114 DAVIE FL 33285-300 DAVIE FL 33285-300			NR #114	.	
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	TIS SPACE
				01/18/1996	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0633806	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	Cily & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible Yes No
<u> </u>	g, Name and Address of Cur		1901	10. Name and Address of New Register	
FE	RREIRA, MARCELO G		81 Name		
10108 SW 13 ST			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PE	MBROKE PINES FL 33025				
			63		
			84 City		85 Zip Code
					-L
11. Pursuant office or	to the provisions of Sections 607.0 registered agent, or both, in the St	0502 and 607.1508, Florida Sta ate of Florida. Such change wa	itutes, the above-named con as authorized by the corpora	rporation submits this statement for the purporation's board of directors. Thereby accept the	se of changing its registered appointment as registered
agent La	am familiar with, and accept the ob	oligations of, Section 607.0505,	Florida Statutes.	ation's board of directors. I hereby accept the	,,
SIGNATURE			NOTE Registered Agent signature requ	uired when reinstating) DA	
12.	Signature, typod or perford name of registered OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PSD	DELETE	1.1 TITLE		Change Addition
NAME	FERREIRA, MARCELO G		1.2 NAME		
STREET ADDRESS	10108 SW 13 ST		1.3 STREET ADDRESS		
CITY - ST - ZIP	PEMBROKE PINES FL 3302	25	1.4 City - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME	(2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		-
TITLE		☐ DELETE	3.1 TATLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME :		CLECTE	4.1 IIILE 4.2 NAME		C Ondrige C Addition
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		
STREET ADDRESS CITY-ST-ZIP					
		DELETE	5 3 STREET ADORESS		Change Addition
CITY-ST-ZIP		DELETE	5 3 STREET ADDRESS 5.4 City-St-Zip		Change Addition
CITY-ST-ZIP TITLE		DELETE	5 3 STREET ADORESS 5 4 C(TY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0/(3)(i). Florida Statutes. I further certify that the informatio 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 frustogympowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address.