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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600006989 1. Corporation Name

ACTIVE TRADE MANAGEMENT CO., INC.

ı	Prin	cipal	Place	of	Business

Mailing Address

03-04-1999 90014 047 ***150.00

FILED

9100 154TH ROA		9100 154TH ROAD NORTH								
JUPITER FL 33478		JUPITER FL 33478				DO NOT WRITE IN THIS SPACE				
					-	3. Date Incorporated o	r Qualifed			
						01/19/1996				
2 Principal Pla	ace of Business	2a. Mailing Address			4, FEI Number		Apı	olied For		
————	Sec of Business	26			65-0636516		Not	Applicable		
21 Suite, Apt. #	t etc	Suite, Apt. #, etc.			-			\$8.75 A	dditional	
22	, 0.0.	27				5. Certifcate of Status	Desired	Fee Re	quired	
City & State		City & State				6. Election Campaign I	Financing	\$5.00	Мау Ве	
23		28				Trust Fund Contribu	tion	Added to	Fees	
Zip	Country	Zip Country				8. This corporation ow	es the current yea		ン	
24	25	29 30				Personal Property Tax. Yes No				
	9. Name and Address of Curren	t Registered Agent				10. Name and Address	s of New Registe	red Agent		
				81 Na	ime /	RNEC	PRED	A	1	
	ROEDER, NORMAN L II			82 Str	eet Address	(P.O. Box Number is N	lot Acceptable)			
6801	LAKE WORTH ROAD, SUITE 12	0				M. A.				
LAKE	WORTH FL 33467			⁸³ 91	100 15	4" Rd. N	'.			
			ļ.	84 Cit	y +	2: 72.		85 Zip C	ode	
					1/47	7701-		FL 3:	776	
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutes of Florida, Such change was auti	, the ab norized	ove-nan	ned corpora	ition submits this statem s board of directors. I he	ent for the purpos reby accept the a	e or cnanging its ppointment as re	registered gistered	
agent. I ar	o the provisions of Sections 607.050 gistered agent, or both, in the State n familia with and accept the bliga	tions of, Section 607.0505, Florid	a Statu	tes.						
SIGNATURE	00100	AUGTE D	naistered (laant niana	ature required wh	non reinstation)	DAT	F	\	
	Signature, typed or printed name of registered agen	ID DIRECTORS	13.	ngan aigira	atare required with	ADDITIONS/CHANG			RS IN 12	
12.		□ DELETE	1.1 1111	F		7,000,000,000		☐ Change	☐ Addition	
[D CODNEI	_	1.2 NAM							
NAME	PREDA, CORNEL			 REET ADDR	RESS					
STREET ADDRESS	9100 154TH ROAD NORTH			Y-ST-ZIP						
CITY-ST-ZIP TITLE	JUPITER FL 33478	▼ DELETE	2.1 TITL					☐ Change	☐ Addition	
	D D	A	2.2 NA			1		<u> </u>		
NAME	IACIU, GHEORGHE			EET ADDR	2500	1 1 [-1	E.T.	Ŀ		
STREET ADDRESS	9100 154TH ROAD NORTH			Y-ST-ZiP				-		
CITY-ST-ZIP	JUPITER FL 33478	☐ DELETE	3.1 TIΠ		_		1,10	☐ Change	Addition	
		_ 500010	3.2 NAM							
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STREET ADDRESS				Y-ST-ZIP	- (
CITY-ST-ZIP		☐ DELETE	4.1 TITI					[] Change	Addition	
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CITY-ST-ZIP		□ DELETE	5.1 TITI					☐ Change	Addition	
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NAME			5,3 STF	REET ADDR	RESS					
STREET ADDRESS				Y-ST-ZIP						
CITY-ST-ZIP		☐ DELETE	6.1 TIT				-14512-1	Change	Addition	
TITLE			6.2 NAJ					,		
NAME			1	ME REET ADDF	DEGG				ļ	
STREET ADDRESS			0.3 3 1	ALC I AUUN	1,50					

CITY-ST-ZIP 14. I 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 oath; that I am an officer or director of the corporation or the receiver or tructee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attachment with an address, with all other like empowered.

SIGNATURE:

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #