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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000025201 (0)

GULF WESTERN TRADING LTD. INTERNATIONAL CORPORAT

FILED May 16 1997 8:00am Secretary of State



·	ice of Business DRIVE STE 9C WE FL 33149	Mailing Address 613 OCEAN DRIVE STE 8C KEY BISCAYNE FL 33148-2314								
						3. Date Incorporated or Qualified 03/21/1996	3a. D	ate of L	ast Re	port
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number			V Ap	plied For
21		26			, <u> </u>					t Applicable
Suite, Api [22]		Suite, Apt. #, etc.	·			5. Certificate of Status Desired		F	ee Re	dditional quired
City & Sta	ile	City & State				6. Election Campaign Financing Trust Fund Contribution				May Be o Fees
23 Zip	Country	28 Zip	Co	untry	,					
24	25	├ ─── ┐ .	29 30			8. This corporation has liability for intringible tax under s. 199.032, Florida Statutes Yes □ No				
	9, Name and Address of Curre			Γ		10. Name and Address of New R	gistered	Agent		
HE	CHT, ALAN R			81	Name		-			
267			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)				
MU	AMI FL 33180			83						
				84	City			85	Zin (Code
				1 1	\ ` '	poration submits this statement for the lion's board of directors. I hereby acce	FL	. } }		
SIGNATURE	Signature Typest or printed name of registered ag OFFICERS AN	ID DIRECTORS	13.		ent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AN			
TITLE	D	DELETE	1.1 7	ITLE				Ch	ange	Addition
NAMÉ	FOGLER, EDWARD N			IAME	i					
STREET ADDRESS	613 OCEAN DRIVE STE 8C KEY BISCAYNE FL 33149		1		ADDRESS					
CHTY-ST-ZIP THILE	KET DISCATINE PE 33148	DELETE	2.17		ST-ZIP			L) Cr	ange	Addition
NAME		ELLY DECENE	221						gu	
STREET ADDRESS	;		1		ADDAESS					
CHTY-ST-ZOF			2.4	CITY-S	ST-ZIP					
TITLE		☐ DELETE	3.1 7	ITLE				Cr	ange	Addition
NAME			3.21			·•				
STREEL ADDRESS	·		1		ADDRESS					
CITY-SI-ZIP TULE		DELETE	3.4. (4.1 T		ST-ZIP			Ch	ange	Addition
NAME				NAME	1					
STREET ADDRESS	3				ADDRESS					
CHY-S1-ZIP			4.40	ITY-\$	ST-ZIP					
THILE		☐ DELETE	5.1 T		,			☐ Ch	ange	Addition
NAME:				IAME	1					
STREET ADDRESS	\$				ADORESS					
CITY-SI-ZIP		DELETE.			ST- 21P			□ cr	ance	Addition
Till!		L.J DELETE	61 T		1			ان نے	anyt	AUGILION
NAME STREET ADDRESS			6.2 M		FADDRESS					
CITY - ST - ZIP	·				ST-ZIP					
			■ 0.4 L		31 · EK					

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 oath; 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 a security with an address.

SIGNATURE: