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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # P96000048163

1. Corporation Name

S. FL. TRADE, INC.

Mailing Address Principal Place of Business 4753 ESTERO BLVD. STE 402B 4753 ESTERO BLVD. STE 402B FORT MYERS BEACH FL 33931 FORT MYERS BEACH FL 33931

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90051 032 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

06/03/1996

City & State Country							001001 1000			
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Section Sect		Country	1,		Country		8. This corporation owes the current year	r Intangible		
AUBURN, JAMES W. 5 117 CASTELLO DR. STE. #1 NAPLES FI. 34103 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 agent. I all million with, and except the obligations of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I all millions with, and except the obligations of Section 507.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. OFFICERS AND DIRECTORS 15. TIME 16. VSD 17. STATE TABORES 1	_ `	· ·	29	34103 30	<u>, </u>		,		Ξ	□No
AUBURN, JAMES W. 5117 CASTELLO DR. STE. #1 NAPLES F. 34103 84 City FL 85 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 lis 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, are 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, are 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, are 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, are both, in the State of Florida. Statutes, the above-name corporation's board of directors. I hereby accept the appointment as registered agent, are both, in the State of Florida. Statutes, the above-name corporation submits this statement for the purpose of changing lis registered directors. I hereby accept the appointment as registered agent, are both, in the State of Florida. Statutes, the above-name corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appoint	24		لنتا		1			red Agent		
Street Address (P. O. Box Number is Not Acceptable)				<u> </u>	81	Name				
STEET ADDRESS OTY -ST-ZP TITLE WALCZAK, CHARDET AT53 ESTERO BLVD. STE 4028 CITY-ST-ZP TITLE WALCZAK, CHARDET AT54 ESTERET ADDRESS OTY-ST-ZP TITLE WALCZAK, CHARDET AT54 ESTERET ADDRESS OTY-ST-ZP TITLE WALCZAK, CHARDET AT54 ESTERET ADDRESS OTY-ST-ZP TITLE WALCZAK, CHARDET AT55 ESTERO BLVD. STE 4028 STREET ADDRESS OTY-ST-ZP TITLE WALCZAK, CHARDET AT56 ESTERO BLVD. STE 4028 AUTY-ST-ZP TITLE WALCZAK, CHARDET AT57 ESTERO BLVD. STE 4028 AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE WALCZAK, CHARDET AUTY-ST-ZP AUTHOR AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE WALCZAK, CHARDET AUTY-ST-ZP AUTHOR AUTY-ST-ZP AUTHOR AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP AUTHOR AUTY-ST-ZP TITLE AUTY-ST-ZP AUGINION AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP AUTY-ST-ZP TITLE AUTY-ST-ZP AUGINION AUTY-ST-ZP TITLE AUTY-ST-ZP AUTY-ST-ZP AUTY-ST-ZP TITLE AUTY-ST-ZP AUTY-ST-ZP TITLE AUTY-ST-ZP AUTY-ST-ZP AUTY-ST-ZP AUTY-ST-ZP TITLE AUTY-ST-ZP TITLE AUTY-ST-ZP AUTY					92	Ctract Add	drops (B.O. Boy Number is Not Acceptable)			
NAPLES FL 34103 84 City FL 85 Zip Code T1. 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 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 with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature inperior presents agent and file it spiketable. INDE: Reposited Agent signature required when rendating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE NAME WALCZAK, RICHARD 4753 ESTERO BLVD. STE 402B STREET ADDRESS CITY 51-2P TITLE VSD WALCZAK, CHRISTEL 4753 ESTERO BLVD. STE 402B 13 STREET ADDRESS CITY 51-2P TITLE DELETE 14 TITLE 12 NAME 13 STREET ADDRESS CITY 51-2P TITLE DELETE 14 TITLE 15 STREET ADDRESS CITY 51-2P TITLE DELETE 15 STREET ADDRESS CITY 51-2P TITLE DELETE 16 STREET ADDRESS CITY 51-2P TITLE DELETE 17 STREET ADDRESS CITY 51-2P TITLE DELETE 18 TITLE DELETE 19 DELETE 10 DELETE 11 TITLE 10 DELETE 11 TITLE 12 NAME 13 STREET ADDRESS CITY 51-2P TITLE 14 TITLE 15 STREET ADDRESS CITY 51-2P TITLE 15 STREET ADDRESS CITY 51-2P TITLE 16 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 16 Change Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	5117	CASTELLO DR.			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
Sections 607 0502 and 607 1508, Florida Statules, he above-named corporation submits this statement for the purpose of changing its 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, am familiar with, and accept the obligations of, Section 607 0505, Florida Statules, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607 0505, Florida Statules, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607 0505, Florida Statules, such as a such agent agent and the 1 applicable. Interest to the provisions of Sections 607 0502 and 607 0505, Florida Statules, be corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607 0505, Florida Statules, be corporation's board of directors. I hereby accept the obligations of directors. I hereby accept the obligation's agent, am familiar with, and accept the obligations of, Section 607 0505, Florida Statules, be corporation's board of directors. I hereby accept the obligation's are registered agent, am familiar with, and accept the obligations of the corporation's board of directors. I hereby accept the obligation's are registered agent, and accept the obligation's accept the obligations of the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligation's accept the appointment as registered accept the obligation's accept the obligatio	STE.	#1			83					
TI. Pursuant to the provisions of Sections 507.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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. SIGNATURE Signature, Speed or provided name of registered agent and title if applicable. OFFICIENTS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE OFFICIENTS AND DIRECTORS IN 12 TITLE WALCZAK, RICHARD 4753 ESTERO BLVD. STE 402B STREET ADDRESS CITY-ST-ZP TITLE VSD WALCZAK, CHRISTEL 4753 ESTERO BLVD. STE 402B STREET ADDRESS CITY-ST-ZP TITLE OELETE 31 TITLE 32 NAME 33 STREET ADDRESS CITY-ST-ZP TITLE OELETE 31 TITLE 31 TITLE 32 NAME 33 STREET ADDRESS CITY-ST-ZP TITLE OELETE 31 TITLE OELETE TITLE OELETE TITLE OELETE 41 TITLE OELETE 41 TITLE OELETE STREET ADDRESS CITY-ST-ZP TITLE OELETE 31 TITLE OELETE TITLE OELETE TITLE OELETE 31 TITLE OELETE 31 TITLE OELETE TITLE OELETE STREET ADDRESS CITY-ST-ZP STREET ADDRESS CITY-ST-ZP TITLE OELETE STREET ADDRESS CITY-ST-ZP STREET	NAP	LES FL 34103								
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Enotide Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, I am familiar with, and accept the obligations of, Section 807.0505, Florida Statutes. SIGNATURE Signature, Speed or protect name of registered speem and title if applicable. NOTE: Registered Agent agreement required Agent required Agent agreement required Agent agreement required Agent required Agent agreement required Agent required					84	City		= 85	Zip Co	ode
office or registered agent, or both, in the State of Horida. Such change was authorized by the copporation's troated agent, and accept the obligations of, Section 607.0505. Florida Statutes. Signature Sign	11 D	to the provisions of Sections 507 0502	and 6	807 1508 Florida Statutes	the abov	e-named cor	moration submits this statement for the purpos	e of changin	g its re	egistered
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent and title if applicable.) (NOTE: Agent and title) (NOTE: Agent an	office or r	egistered agent, or both, in the State of	Horn	da. Such change was autr	iorizea dy	tne corpora	tion's board of directors. I hereby accept the a	opointment a	as regi	stered
12.	SIGNATURE	Out the hand as stated name of an air-trail agent	and title	if applicable (NOTE: De	oustered Age	nt synnature requi	ired when reinstating) DATI			
TITLE	12					nit signaturo roqui			CTOR	S IN 12
NAME			Direct							Addition
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TITLE										
NAME				□ nci ete		51-ZIP		Cha	inge	☐ Addition
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TITLE										
TITLE	STREET ADDRESS									
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CITY-ST-ZIP 64 CITY-ST-ZIP	NAME				6.2 NAME					
U11-31-21F	STREET ADDRESS				6.3 STREE	TADDRESS				
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	CITY-ST-ZIP		71	1		I .	<u>. </u>			

indicated on this annual report or suppliemental agricular 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 of 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 attach ment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR