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 # P96000055889 (5)

AMERICAN S.L. TRADING, INC.

Principal Place of Business

Mailing Address

ON COURT A CERET

202 SOUTH O STREET

FILED Aug 14 1997 8:00am Secretary of State



LAKE WORTH FL \$3460		LAKE WORTH FL 33460-42	LAKE WORTH FL 33460-4279					
·					3. Date Incorporated or Qualified 06/28/1996	3a. Date of Last	Report	
	Place of Business	2a. Mailing Address	.		4. FEI Number	P	Applied For	
21		26 P.O. Cox	3091		65-0717342 Not Applicable			
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat	te	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip								
24	25	29 33465-3091		ŚA	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
,		Current Registered Agent	001 0		10. Name and Address of New Reg		· · · · · · · · · · · · · · · · · · ·	
FR	EDLAND, KIRK		81	Name				
501 SO FLAGLER DRIVE STE 505					82 Street Address (P.O. Box Number is Not Acceptable)			
WEST PALM BEACH FL 33401				Street Address (P.O. Box Number is Not Acceptable)				
***	OT THEM BENOTITE OUT	•	83	1			,	
			84	City		85 Zip	Code	
				"				
11. Pursuant office or agent. Le	to the provisions of Sections 6 registered agent, or both, in the am familiar with, and accept the results of the provision of the provision of the the provision of the provision of the provision of the the provisions of Sections 6 the provisions	607.0502 and 607.1508, Florida Statute e State of Florida. Such change was a e obligations of, Section 607.0505, Flo	es, the abov uthorized b rida Statule	re-named co y the corpo is.	orporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing t the appointment a	its registered s registered	
SIGNATURE	Signature, typed or printed name of regis	eleved agent and little if applicable (NOTE	: Registered Ag	ent signature re	quired when reinstating)	DATE	· · · · · ·	
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition	
NAME	LAURENT, GILBERT		1.2 NAME					
STREET ADDRESS	202 SOUTH O STREET		1.3 STREET ADDRESS		,			
CITY-ST-ZIP	LAKE WORTH FL 33460	1	1.4 CiTY-ST-ZiP					
TITLE	VSD	☐ DELETE	21 TITLE			☐ Change	☐ Addition	
NAME	LAURENT, SEBASTIEN		2.2 NAME					
STREET ADDRESS	202 SOUTH O STREET		23 STREE	T ADDRESS '				
CITY-ST-ZIP	LAKE WORTH FL 33460		2 4 CITY-	ST-ZIP				
TITLE	DELETE 31		3 1 TITLE			Change	☐ Addition	
NAME			3.2 NAME				ļ	
STREET ADDRESS				ADDRESS			i	
CITY-ST-ZIP		DELETE	3.4. CITY -	ST-ZIP		[7]	T Addition	
TITLE NAME		() veceit	4.1 TITLE			Change	L Addition	
STREET ADDRESS			4. 2 NAME	1				
				T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	. 4.4 CITY - 5	51-ZIP		Change	Addition	
NAME		_ out.it	5.1 HILE 5.2 NAME			L.J Ominge	Last Houlder	
STREET ADDRESS				I ADDRESS		•		
CITY-ST-ZIP			5.3 STREE					
TITLE		☐ DÉLETE	61 TITLE	D1-21F		Change	Addition	
NAME			6.2 NAME	-		change		
STREET ADDRESS				T ADDRESS				
City-ST-ZIP			6.4 CITY-5					
- · · · · · · · · · · · · · · · · · · ·								

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 an atlachment with an address.