SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998DOCUMENT #

P96000071163 (5)

INTEX TRADING CORPORATION

FILED Sep 17 1998 8:00am Secretary of State



Principal Place	e of Business	Malling Address			T (ODINODI 110 10410 BAIAS ODIAI ABAIA ODIAI 18800 LIDDA LIBOO HARI 14 DI		
1706 WISCONS	SIN LANE	P.O. BOX 871					
SARASOTA FL	34239	SARASOTA FL 34230		DO MOT MIDITE IN THIS COACE			
US		US	US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
A Delevie of D	Name of Programme	On Atallina Address			08/26/1996 4. FEI Number	I Applied For	
	lace of Business	2a. Malling Address 26 POB + 871				Applied For Not Applicable	
21 / 66 % Suite, Apt	MAIN STREET		Suite, Apt. #, etc.		65-0709601	\$8.75 Additional	
' '	#, etc.	27		5. Certificate of Status Desired	Fee Required		
City & Stat	le .	City & State			6. Election Campaign Financing	\$5.00 May Be	
	ASOTA, FL	28 SARASOTA FL		Trust Fund Contribution	Added to Fees		
Zip 24 3イン	36 25 US A	Zip 3 1 2 3 0 3	Count	ČS A	This corporation owes or has paid the cu Personal Properly Tax due June 30.	ırrent year Intengible	
24) (1/2	9. Name and Address of Current				10. Name and Address of New Registered		
R1 Name							
NADEL, ARTHUR				I A	RTHUR NADEL		
1706 WISCONSIN LANE					ess (P.O. Box Number Is Not Acceptable)		
SARASOTA FL 34239				166	MAIN ST.		
			ا ا				
				4 City CA	RASOTA FI	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 its registered office or 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, typod or printed name of registered agent	AYRTHUR NA		Agent signature require		<u> </u>	
12.	OFFICERS AND		13.	Agent eighbilde requir	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TITLE			Change Addition	
NAME	NADEL, ARTHUR		1.2 NAM			- Charles - Constitution	
STREET ADDRESS	1706 WISCONSIN LANE		1.3 STRE	ET ADDRESS		}	
CITY-ST-ZIP	SARASOTA FL 34239		1.4 CITY				
TITLE	0.40.00	DELETE	2.1 TITLE			Change Addition	
NAME			2.2 NAM				
STREET ADDRESS			2.3 STRE	ET ADDRESS		ĺ	
CITY-ST-ZIP			2.4 CITY-	ST-ZIP			
TITLE		DELETE	3.1 TITLE			Change Addition	
NAME		Frank Descrip	3.2 NAM	<u> </u>			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4 CITY-	ST-ZIP			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME		<u></u>	4.2 NAM	<u> </u>			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		DELETE	5.1 TITLE	:		Change Addition	
NAME			5.2 NAM	·			
STREET ADDRESS			5.3 STRE	ET ADDRESS		1	
CITY-ST-ZIP			5.4 CITY-				
TITLE		DELETE	6.1 TITLE			Change Addition	
NAME			6.2 NAM6				
STREET ADDRESS			•	ET ADDRESS			
CITY-ST-ZIP			6.4 CITY-			1	
	l ertify that the information supplied with t	this filing does not qualify for the			on 119.07(3)(i), Florida Statutes, I further certify	that the information	

4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(j), 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 507, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 6, or on an attachment with an address.

IGNATURE: // MINICHALLY CHARTHANK MADEL 9/14/9X 941-366-0975