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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600076006 (1)

JENNA TRADING CORP.

Principal Place of Business Mailing Address 47004 W. DIXIE HWY. -17004 W. DIXIE + MY-N- MIAMI BEACH FL 33160 AL MIAMI BEACH FL 23160. DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 09/12/1996 2. Principal Place of Business Mailing Address FEI Number Applied For 18761 W. A 7290 NE 19 AM 65-0692713 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 10. Name and Address of New Registered Agent of Current Registered ALMAN, MARTIN H 17004 W. DIXIE HWY. 82 N. MIAMI BEACH FL 33100 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 SIGNATURE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE Change Addition 1 1 TITLE GOLDMAN, JEROME NAME 12 NAME STREET ADDRESS 18761 W. DIXIE HWY. 1.3 STREET ADDRESS N. MIAMI BEACH FL 33180 CITY-ST-ZIP 1.4 CITY-ST-ZIP CLETE 2.1 TITLE Change CALLIN PHYLLIS NAME 2.2 NAME 18761 W. DIXIE HWY. STREET ADDRESS 2.3 STREET ADDRESS N. MIAMI BEACH FL 33180 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZW 4.4 CITY - ST-ZIP DELETE TITLE 5.1 TITLE Change Addition

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 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 anyettachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE: Person Signature

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

JEREME GOLDMAN 4/28/40 VOCAMOOD

Change

Addition

FILED

May 13 1998 8:00am

Secretary of State

3R2E034 (10/97)