## 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 # P96000092033 (5)

SLOVAK-AMERICAN TRADE COMPANY

Principal Place of Business Mailino Address



97 JUN 23 PM 2: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA



126 SOUTH "D" STREET SUITE 7 LAKE WORTH FL \$3480		1	126 SOUTH "D" STREET SUITE 7 LAKE WORTH FL 33480-4080				3. Date Incorporated or Qualified 11/07/1996	<b>3a</b> . Da	ate of Last	Report
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For
21		26	3]				65-0737871			Vot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				Certificate of Status Desired	K		Additional
City & Stat		27	City & State	· · · · ·						Required
23	Ð	28	ר י				Election Campaign Financing     Trust Fund Contribution			<b>0</b> May Be d to Fees
Zip	Country	120	Zip	Cour	ntry	,	This corporation has liability for its corporation as the second se	-=		
24	25	29	<b>"</b>	30	•				No	8. 199.032,
<del></del>	9, Name and Address of Curre		<del></del>				10. Name and Address of New Re			
126 SUI	Tyka, Slavomir South "D" Street Te 7 E Worth Fl 33480				81 82 83	Name Street Add	dress (P.O. Box Number is Not Acceptab	le)	<b>85</b> Zip	) Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the State im familiar with, and accept the oblig Signature typed or printed name of registered ag	of Flor ations o	rida. Such change was of, Section 607.0505, F	authorized Iorida Statu III. Registered	i by utes	the corpora s.	poration submits this statement for the pation's board of directors. I hereby accepaired when rolinstating)	ot the app	ointment a	s registered
12.	OFFICERS AN	D DIRE		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
NAME STREET ADDRESS CITY-ST-ZIP	PST MOTYKA, SLAVOMIR 126 SOUTH "D" STREET SUIT LAKE WORTH FL 33460	E 7	DELETE	1.1 111) 1.2 NAM 1.3 STA 1.4 CIT	ME REET	ADDRESS			Change	Addition
TITLE			☐ DELETE	217111					Change	Addition
NAME				2.2 NA	ME					
STREET ADDRESS				2.3 STR	REFT	ADDRESS				
CITY-ST-ZIP				2. 4 GIT						
TITLE			DELETE	3.1 7171					☐ Change	Addition
NAME				3.2 NAM	ME		9000022	21	839	
STREET ADDRESS				3.3 STR	REE1	ADDRESS	9000022 -06/2 <u>4/</u>	970	1093	-008
CITY-ST-ZIP				3.4. CIT	IY-S	17-71P	*****1 <b>?</b> ;	3.75	神神神神]	173.75
TITLE			DELETE	4.1 1110	LĒ				Change	Addition
NAME				4. 2 NA	ME					
STREET ADDRESS				4 3 STR	EET	ADDRESS				
CITY-ST-ZIP				4.4 C(T)	Y-SI	T - ZIP				
TITLE			DELETE	5.1 TITU	LĒ				☐ Change	Addition
NAME				5.2 NAN	ME		_			
STREET DORESS				5.3 STR	KEET.	ADDRESS	Λ 1.	_	/	
CITY-ST-ZIP				5.4 CITY			0.91. 192:	an	•	
TITLE			DELETE	6.1 Till			117	2/2-	Change	Addition
NAME				6.2 NAN			4/2:	5197		
STREET ADDRESS						ADDRESS	/	/ ' '		
CITY-ST-ZIP				6.4 CITY						
W111 W1 '411				0.4 (1)						

1 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 attachment with an address.