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

**PROFIT** CORPORATION ANNUAL REPORT



FERIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

1997

**BOYNTON BEACH FL 33435** 

DOCUMENT # P96000102971 (4)

U.S.-INTERNATIONAL TRADE CONSULTANTS, INC.

Principal Place of Business Mailing Address UNIT 4, 1600 N. FEDERAL HWY. UNIT 4, 1600 N. FEDERAL HWY.

BOYNTON BEACH FL 33435-2811

**FILED** May 28 1997 8:00am Secretary of State

3a. Date of Last Report



3. Date Incorporated or Qualified

12/23/1996

2. Principal P	lace of Business	2a. Mailing Addre	2a. Mailing Address			4. FEI Number			plied For	
21		26	26			65-0716616		No	t Applicable	
Suite, Apt.	#, elc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & Stati	(!	City & State				& Floation Compaign Financia	<u> </u>		·	
23		28	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Coun	try		8. This corporation has liability for intangible tax under s. 199.032,				
24 25 29 30					Florida Statutes Yes No					
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
3732 N.W. 18TH STREET					81 Name					
					82 Street Address (P.O. Box Number is Not Acceptable)					
FT. LAUDERDALE FL 33311-4132				83						
				•						
			Ī	14 Ci	У		FL	<b>85</b> Zip (	Code	
11.* Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at										
11. Pursuant office or r	to the provisions of Sections t registered agent, or both, in th	607.0502 and 607.1508, Florid le State of Florida. Such chani	ia Statutes, the abo de was authorized	ove-nai by the	nea corpo corporatio	pration submits this statement for tr on's board of directors. I hereby ac	ne purpose of scept the apo	changing it: ointment as	s registered registered	
agent. La	im familiar with, and accept th	e obligations of, Section 607.	5505, Florida Statu	tes		on's board of directors. I hereby ac				
SIGNATURE										
	Signature typed or proted name of regi-		(NOTE: Registered	Agent sig	nature required		DATE			
12	·	RS AND DIRECTORS	13,		····	ADDITIONS/CHANGES TO OF	FICERS AND			
TITLE	D	☐ DE	LETE 1.1 TITU	E				Change	Addition	
NAME	BLAHETKA, RUSSELL		1.2 NAM	4E						
STREET ADDRESS	UNIT 4, 1600 N. FEDER/		1.3 STR	EET ADDR	ESS					
Crty - St - ZIP	BOYNTON BEACH FL 33	<b>1435</b>	1.4 CITY	/- \$T- ZIP						
TITLE		☐ DE						Change	Addition	
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NAME			6.2 NAN					- <del>-</del>		
STREET ADDRESS				eet addf	500					
					- 1	•				
City St. ZiP	by certify that the information	supplied with this filing does r		-ST-ZIP		in Section 119.07(3)(i), Florida Sta	tutes   further	certify that	the	
informatic	an andicated on this annual reg	pori or supplemental annual re	eport is true and ac	curate	and that r	my signature shall have the same I as required by Chapter 507, Florid	legal effect as	if made und	der oath; that [	