## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Mailing Address

1730 N.E. 138TH STREET

NORTH MIAMI BEACH FL 33181

**PROFIT** CORPORATION ANNUAL REPORT

1999

Principal Place of Business

NORTH MIAMI BEACH FL 33181

1730 N.E. 138TH STREET

CITY-ST-ZIP TITLE

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

NAME



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000084949

TRADERS BROKERS AND CONSULTANTS INC.

09/30/1997 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21-1175 NE-125th 1175-NE 125 65-0788419 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired #306 #306 Fee Required \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes the current year 33161 USA | Yes 29 Intangible Personal Property. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name RILEY, RONALD Street Address (P.O. Box Number is Not Acceptable) 82 1730 N.E. 138TH STREET NORTH MIAM! FL 33181 83 City Zip Code 84 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (2/3)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. 1 1 TITLE Change Addition TITLE DELETE **CR2E034** 1.2 NAME NAME RILEY, RONALD 1730 N.E. 138TH STREET 1.3 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33181 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.1 TITLE TITLE DELETE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE DELETE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE Change DELETE Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETÉ 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

14. I hereby certify that the information supplied with this filing does not qualify lot the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or emplemental 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 conforation 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.

Can

NAME OF SIGNING OFFICER OR DIRECTOR

Jul 20, 1999 8:00 am Secretary of State

07-20-1999 90033 030 \*\*\*550.00

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Change

Daytime Phone #