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

**PROFIT** CORPORATION ANNUAL REPORT

1999

DOCUMENT # V07487



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90119 044 \*\*\*150.00

| FLORI-C/  | AN TRADING, INC.               |                     |              |       |                    |  |                                    |                           |
|---|--------------------------------|---------------------|--------------|-------|--------------------|--|------------------------------------|---------------------------|
| Principal Place   | of Business                    | Mailing Address     | <del>-</del> |       | *****              | 1 (##)   #)  | #1#11 #1#11 <b>#1</b> #11 <b>#</b> | 11917 WIWII 7 <b>09</b> 7 |
| 3007 N. STATE RD. 7 HOLLYWOOD FL 33021 US 3007 N. STATE RAD 7 HOLLYWOOD FL 33021 US   |                                |                     |              |       |                    | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed     |                                    |                           |
|   |                                |                     |              |       |                    | 01/17/1992   |                                    | [                         |
| 2 Principal Pl  | ace of Business                | 2a. Mailing Address |              |       |                    | 4. FEI Number  | Ap                                 | plied For                 |
| 21  |                                | 26                  |              |       | ·                  | 65-0306496   | No                                 | t Applicable              |
| Suite, Apt.   | #, etc.                        | Suite, Apt. #, etc. |              |       |                    | 5. Certifcate of Status Desired                                  | \$8.75 A<br>Fee Re                 | _                         |
| 22  |                                |                     |              |       |                    | 6. Election Campaign Financing                                   | \$5.00                             | May Be                    |
| 23  | •                              | 28                  | ¬ ´          |       |                    | Trust Fund Contribution  | Added to                           |                           |
| Zip   | Country 25                     | Zip                 | Country      |       | ,                  | This corporation owes the current year In Personal Property Tax. |                                    | □No                       |
| 24  | 9. Name and Address of Current |                     |              |       | - / -              | 10. Name and Address of New Registered                           | Agent                              |                           |
|   |                                | <u> </u>            | 8            | 31    | Name               |  |                                    |                           |
| RENE, DANIEL<br>3007 N. STATE ROAD  |                                |                     | 8            | 32    | Street Addre       | ess (P.O. Box Number is Not Acceptable)                          |                                    |                           |
| HOLLYWOOD FL 33021  |                                |                     | ε            | 33    |                    |  |                                    |                           |
|   |                                | -;                  | 8            | 14    | City               |  | 85 Zip C                           | Code                      |
|   |                                |                     |              | _Ļ    |                    |  |                                    | registered                |
| 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. |                                |                     |              |       |                    |  |                                    | gistered                  |
| SIGNATURE   |                                |                     |              |       | -1                 | 1 when reinstating) DATE   |                                    | {                         |
|   |                                |                     |              | gent  | signature required | 1 when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A         | ND DIRECTO                         | RS IN 12                  |
| 12.   | DP OFFICERS AND                | DELETE              | 13.          | <br>F |                    | 7007770707   | Change                             | Addition                  |
| NAME  | RENE, DANIEL                   |                     | 1.2 NAM      |       | 1                  |  |                                    | ł                         |
| STREET ADDRESS  | 3007 N. STATE ROAD, 7          |                     | 1.3 STREE    |       | ADDRESS :          |  |                                    |                           |
|   |                                |                     | 1.4 CITY     |       |                    |  |                                    |                           |
| CITY-ST-ZIP   | TS                             | DELETE 2.1T         |              |       |                    |  | Change                             | Addition                  |
| NAME  | LEDUC, JOHNANNE                | <del></del>         |              | ΙE    |                    |  |                                    | f                         |
| STREET ADDRESS  |                                |                     |              |       | ADORESS            |  |                                    |                           |
| \   |                                |                     | 2. 4 CIT     |       | į.                 |  |                                    | }                         |
| CITY-ST-ZIP   |                                |                     | 3.1 TITL     |       | - <del></del>      |  | Change                             | ☐ Addition                |
| NAME  |                                |                     | 3.2 NAM      | E     |                    |  |                                    |                           |
| STREET ADDRESS  |                                |                     | 3.3 STR      | EET/  | ADDRESS            |  |                                    | }                         |
| CITY-ST-ZIP   |                                |                     | 3.4. CIT     |       |                    |  |                                    |                           |
| TITLE   |                                | ☐ DELETE            | 4.1 TITLE    |       |                    |  | Change                             | ☐ Addition                |
| NAME  |                                |                     | 4.2 NAM      | ΝE    | 1                  |  |                                    | )                         |
| STREET ADDRESS  |                                |                     | 4.3 STR      | EETA  | ADORESS            |  |                                    | i]                        |
| CITY-ST-ZIP   | •                              |                     | 4.4 CITY     | -ST-  | -ZIP               |  |                                    |                           |
| TITLE   |                                | ☐ DELETE            | 5.1 TITL     | E     |                    | <del></del>  | Change                             | ☐ Addition \              |
| NAME  |                                |                     | 5.2 NAM      | ΙE    |                    |  |                                    | 1                         |
| STREET ADDRESS  |                                |                     | 5.3 STR      | EET / | ADDRESS            |  |                                    | ĺ                         |
| CITY-ST-ZIP   |                                |                     | 5.4 CITY-51  |       | -ZIP               |  |                                    |                           |
| TITLE   |                                | ☐ DELETE            | 6.1 TITL     |       |                    |  | ☐ Change                           | ☐ Addition                |
| NAME  |                                |                     | 6.2 NAM      | Œ     |                    |  |                                    |                           |
| CTDECT ADODESC  |                                |                     | 6.3 STR      | EET / | ADDRESS            |  |                                    | . }                       |

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not quelify 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, from an attachment with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS