

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V54814 (1)

1. Corporation Name
INTERMARKET TRADING ADVISORS INC.

Principal Place of Business 1300 CORP. CTR WAY STE 105 WELLINGTON FL 33414 US	Mailing Address 13860-12 WELLINGTON TRACE SUITE 500 WELLINGTON FL 33414 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/29/1992

4. FEI Number 65-0354838	Applied For <input type="checkbox"/> Not Applicable
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2. Principal Place of Business 21 1500 Corporate Center Way Suite, Apt. #, etc. 22 Suite 202 City & State 23 Wellington, FL Zip 24 33414 Country 25 USA	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
JAFEE & COMPANY, P.A.
3900 HOLLYWOOD BLVD.
STE. 302
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT NISHIKAWA, RENATO T 13860-12 WELLINGTON TRACE., SUITE 500 WELLINGTON FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D.T NISHIKAWA, RENATO T. AL. JAU, 327, APT 11 SAO Paulo SP, BRASIL 01420-000
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC ISHIDA, MASAHICO 1-16-8 KAKIGARACHO, HEIWA BLDG 7TH FLOOR TOKYO 103 JAPAN	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DC ISHIDA, MASAHICO MASAHICO NRS Bldg. 6F 1-1-11 N.HOMBASHI NINGYO CHO Chuo-Ku Tokyo 103 JAPAN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DECKER, DENNIS 13860-12 WELLINGTON TRACE., SUITE 500 WELLINGTON FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	DP Decker, Dennis 15200 Meadowwood Dr Wellington, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MARRIOTT, PHILLIP B. 1055 N MIRAMAR MESA AZ	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	DS marriott, Philip B. 1845 South 140 EAST OREM, UT 84058
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 an attachment with an address.

SIGNATURE:  Dennis Decker 2/11/97 (561) 688-5778

CR2E034 (10/97)