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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1997 8:00am

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Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V67566

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PROGRAM TRADING CORP.

SIGNATURE:

| ***** | | | | | | | |
|---|---|--|---------------------------------|---------------------------------|---|--|----------------------------|
| Principal Place of Business Mailing Address | | | | | r hans a grand drok land drop drop drop drop drop kidd drap drap drop drop drop drop drop drop drop | | |
| 111 NORTH ORANGE AVE | | 111 NORTH ORANGE AT | VE | | İ | | |
| 825 ORLANDO FL 32901 | | 825 ORLANDO FL 32801-239 | g | | | | |
| US | 200. | US | | | 3. Date Incorporated or Qualified | 3a. Date of Last Re | eport |
| | | | | | 09/25/1992 | 05/01/1996 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | 4. FEI Number | + | plied For |
| 21 | | 26 | | | 59-3145580 | | t Applicable |
| Suite, Apt. | #, etc. | Suite, Apt #, etc. | | | 5. Certificate of Status Desired | \$8.75 A | |
| City & Stale | Đ | City & State | | | 6. Election Campaign Financing | \$5.00 | |
| 23 | · | 28 | | | Trust Fund Contribution | Added t | |
| Zip | Country | Ζιρ | Coun | itry | 8. This corporation has liability for | | |
| 24 | 25 | 29 | 30 | | | Yes No | , |
| | 9. Name and Address of Curr | ent Registered Agent | | | 10. Name and Address of New R | agistered Agent | |
| REN | NEKER, ROBERT J. | | [1 | Name | RENNEKER Rober | + - | |
| |) KEYES AVE | | - - | 32 Street Add | dress (P.O. Box Number is Not Accepta | ble) | |
| S-25 | i0 | | L | | III N. CRANGE A | ie. Sie:82 | 5 |
| WIN | TER PARK FL 32789 | | | B3 | • | | |
| | | | ŀ | B4 City | | 85 Zip (| Code |
| | | TO A SECURITY OF THE TAX OF THE T | | | ORLANDO | FL 1.32 | ጀ ጋ(|
| 11. Pursuant office or r | to the provisions of Sections 607.0 registered agent, or bain in he Sta | 502 and 607.1508, Florida Sta ate of Florida, Such change wa | tutes, the ab- is authorized | ove-named cor by the corpora | rporation submits this statement for the ation's board of directors. I hereby acce | purpose of changing it opt the appointment as | s registered registered |
| agent. La | im familiar with, and accept the ob- | ligations of, Section 607.0505, | Florida Statu | ites. | 1 | 1010 | |
| SIGNATURE | | RENN | EKER | Yes | sident | 1/18/97 | |
| 12. | | AND DIRECTORS (N | IOTE: Registered | Agent signature requ | uired when reinstating) ADDITIONS/CHANGES TO OFFI | CERS AND DIRECTOR | IS IN 12 |
| TITLE | DP OFFICERS P | DELETE | 1.1 TIT | F | ADDITIONO/OFFATGED TO OFF | Change | Addition |
| NAME | RENNEKER, ROBERT J. | | 1.2 NA | | | | •••• |
| STREET ADDRESS | 1110 KEYES AVE. | | 1 | | PO BOX 3764 | | |
| CITY-ST-ZIP | WINTER PARK FL | | | Y-\$T-ZIP | PO BOX 3764 Oplando, fl 328 | 102-3764 | |
| TITLE | | ☐ DELETE | 2.1 1111 | .E | | ☐ Change | Addition |
| NAME | | | 2.2 NA | ME | | | |
| STHEET ADDRESS | | | 2.3 ST# | EET ADDRESS | | | |
| CITY - ST - ZIP | | | 2. 4 CII | Y-ST-ZIP | | · · · · · · · · · · · · · · · · · · · | |
| TITLE | | DELETE | 3.1 TITL | .F | | Change | Addition . |
| NAME | <u> </u> | | 3.2 NA | ME | | | |
| STREET ADDRESS | | | 3.3 STF | REET ADDRESS | | | |
| CITY-ST-ZIP | | | 3.4. Cf1 | IY-ST-ZIP | | | |
| THTLE | | ☐ DELETE | 4.1 TIT | | | Change | Addition |
| NAME | | | 4. 2 NA | | | | |
| STREET ADDRESS | | | | REET ADDRESS | | | |
| CITY-S1-7IP | | DELETE | | Y-ST-ZIP | | Charac | And disc. |
| TITLE | | E DELETE | 5.1 TIT | | | Change | Addition |
| NAMÉ | | | 5.2 NAI | · | | | |
| STREET ADORESS | | | 1 | REET ADDRESS | | | |
| CITY-ST-7iP | | ☐ DELETE | | Y-ST-ZIP | | Change | Addition |
| TITLE | | | 61 TIT | | | Emil Crioride | - Anneille |
| NAME | | | 62 NA | | | | |
| STREET ADDRESS | | | | REET ADDRESS | | | |
| CITY-ST-ZIP | hy certify that the information supri | lied with this filing does not a | | Y-ST-ZIP exemption state | ed in Section 119.07(3)(i), Florida Statut | es. I further certify that | the |
| Information | on indicated on this annual report of | or supplemental annual report | is true and a | ccurate and the | at my signature shall have the same led | pal effect as if made un | ider oath; that |
| am an c appears | onicer or director of the corporation in Block 12 or Block 13 if changed | or the receiver or trustee emp or on an attachment with an a | address. | vecare rus tebe | ort as required by Chapter 607, Florida | orandes, and that my i | ile) (RC |