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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **V72252**

	SEN TRADING INCORPORA	ATED						
Principal Plac	e of Business	Mailing Address			f i Mari Misars sons # since since		 	
272 BAL BAY DR 272 BAL BAY DR								
BAL HARBOUR FL 33154 BAL HARBOUR FL 33154					DO NOT W	RITE IN THIS	SPACE	
					3. Date Incorporated or Qualife		0.7.02	
					10/19/1992			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Ap	plied For
21		26			65-0366735		No	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	. 🗆	\$8.75	
22		27					Fee Re	•
City & Stat	e	City & State			Election Campaign Financin Trust Fund Contribution	g 🗌	\$5.00 Added 1	
Zip	Country	Zip	Count	rv	8. This corporation owes the co	irrent vear Int		10 1 003
24	25	29	30	•	Personal Property Tax.	on our your mi	√ Yes '	10 00
	9 Name and Address of Curre	11			10. Name and Address of Nev	v Registered	Agent	
ANDREE	scu		8	1 Name		•		
طلالات	Enough recini		8	2 Street Add	ress (P.O. Box Number is Not Acce	otable)		
	BAL BAY DR	_		ゴゴブ	BAL BAY DRIVE			
	E KENNEDY BLVD SUITE 170	90	8	3				
BAL	HARBOUR FL 33154		1.9	4 City o		·	85 Zip (Code .
				1 , R	AL HARBOUR	FL		50°54
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida St						
office or r agent. I a	registered agent, or both, in the State om familiar with, and accept the oblig	e of Florida. Such change w	as authorized b	v the corporation	on's board of directors. I hereby acc	ept the appoi	ntment as re	gistered
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change w pations of, Section 607.0505	ras authorized b i, Florida Statute	ey the corporations.	on's board of directors. I nereby acc	cept the appoi	ntment as re	gistered
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supplied with his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information upplemental 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 or the receiper or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in prival an address, with all other like empowered. 14. I hereby certify that the information indicated on this annual report of st officer or director of the corporation Block 12 or Block 13 if changed, at

6.2 NAME

6.4 CITY-ST-ZIP

SIGNATURE: X

NAME STREET ADDRESS

CITY-ST-ZIP