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Mar 03, 1999 8:00 am
Secretary of State

03-03-1999 90051 049 ***150.00



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

PROFIT CORPORATION
 ANNUAL REPORT
1999

DOCUMENT # **S61638**

1. Corporation Name
PERSONAL SOFT TRADING INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 6700 S.W. 57TH TERRACE MIAMI FL 33143	Mailing Address 6700 S.W. 57TH TERRACE MIAMI FL 33143
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3. Date Incorporated or Qualified 06/20/1991	
4. FEI Number 65-0268126	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country
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9. Name and Address of Current Registered Agent

ABRAMI, JUAN J.
6700 S.W. 57TH TERRACE
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name **ABRAMI JUAN J.**
 82 Street Address (P.O. Box Number is Not Acceptable)
7344 S.W. 48 ST # 202
 83
 84 City **MIAMI** FL 85 Zip Code **33155**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	ABRAMI, JUAN J.
STREET ADDRESS	6700 S.W. 57TH TERRACE
CITY-ST-ZIP	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	ABRAMI JUAN J. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	7344 S.W. 48 ST # 202
1.3 STREET ADDRESS	MIAMI FL 33155
1.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: _____ DATE: **2-12-99** DAYTIME PHONE #: **305-661-6772**

CR2E034 (11/98)