

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**FILED
Jul 28 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # P17409 (4)
 1. Corporation Name
PS TRADING, INC.



Principal Place of Business 17742 PRESTON ROAD SUITE 1050 DALLAS TX 75252 US	Mailing Address 4370 LA JOLLA VILLAGE DRIVE SUITE 1050 SAN DIEGO CA 92122 US
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip Country	Zip Country
24 25	29 30

3. Date Incorporated or Qualified 12/28/1987	3a. Date of Last Report 01/26/1996
4. FEI Number 95-3446852	Applied For 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 or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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

TITLE	TCFO	<input type="checkbox"/> DELETE
NAME	GUSKE, LAWRENCE A.	
STREET ADDRESS	4370 LA JOLLA VILLAGE DR	
CITY-ST-ZIP	SAN DIEGO CA	
TITLE	CS	<input type="checkbox"/> DELETE
NAME	UNGER, JOHANNA	
STREET ADDRESS	4370 LA JOLLA VILLAGE	
CITY-ST-ZIP	SAN DIEGO CA	
TITLE	P	<input checked="" type="checkbox"/> DELETE
NAME	JONES, DOUG	
STREET ADDRESS	17742 PRESTON RD	
CITY-ST-ZIP	DALLAS TX	
TITLE	C	<input type="checkbox"/> DELETE
NAME	RICKERHAMSON, C E JR	
STREET ADDRESS	4370 LA JOLLA VILLAGE DRIVE # 1050	
CITY-ST-ZIP	SAN DIEGO CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 _____ **Johanna Unger** 7-21-97 1-19-653-288U

32E034 (4/97)

PS TRADING, INC.

4370 La Jolla Village Drive
Suite 1050
San Diego, CA 92122
EIN 95-3446852

Officers &

Soe Sec No. Title Address and Phone No.

Lawrence A. Guske
557-60-4477
J0875416

Vice President-Finance,
Chief Fianacial Officer &
Treasurer

4370 La Jolla Village Dr.
Suite 1050
San Diego, CA 92122
(619) 642-2999

Micheal Kooken
242-62-5528
R0290671

Vice President

4370 La Jolla Village Dr.
Suite 1050
San Diego, CA 92122
(619) 642-2999

Johanna Unger
555-74-7670
P0448998

Vice President &
Corporate Secretary

4370 La Jolla Village Dr.
Suite 1050
San Diego, CA 92122
(619) 642-2999

DIRECTORS

C.E. Rickershauser, Jr
Jo Unger
Lawrence A. Guske