


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan. 15, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000004823
 1. Entity Name
 NEWMARKET TRADING, INC.



Principal Place of Business
 310 N. WESTLAKE BLVD STE. 250
 WESTLAKE VILLAGE, CA 91362

Mailing Address
 PO BOX 14538
 LONG BEACH, CA 90853



01092004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 95-4745281 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 EMANUEL, BILL
 3006 20TH STREET
 VERO BEACH, FL 32960

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	WAKANA, TAKAHIKO
STREET ADDRESS	23104 LOS CODONA AVE
CITY-ST-ZIP	TORRANCE, CA 90505
TITLE	VCVP
NAME	BETTENCOURT, STEPHEN
STREET ADDRESS	2148 W ALLUVIAL
CITY-ST-ZIP	FRESNO, CA 93711
TITLE	D
NAME	RIE, ROBERT JR
STREET ADDRESS	1171 E LAQUINTA
CITY-ST-ZIP	FRESNO, CA 93720
TITLE	S
NAME	MEYERS, BARRY
STREET ADDRESS	10747 BOBCAT LANE
CITY-ST-ZIP	ARROYO GRANDE, CA 93420
TITLE	T
NAME	TORIUMI, TAKAHISHI
STREET ADDRESS	756 CEDAR POINT PLACE
CITY-ST-ZIP	THOUSAND OAKS, CA 93162
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000005493
 01/15/04-80053-016 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stephen P. Bettencourt VP 1-9-04 559-432-3520
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Stephen P. Bettencourt