


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

07-05-2005 90120 046 \*\*\*163.75  
P00000036583

**DOCUMENT # P00000036583**  
1. Entity Name  
**SESOM INTERNATIONAL TRADING COMPANY**



Principal Place of Business  
**11161 N.W. 26TH DRIVE  
CORAL SPRINGS, FL 33065**

Mailing Address  
**11161 N.W. 26TH DRIVE  
CORAL SPRINGS, FL 33065**

**DO NOT WRITE IN THIS SPACE**

**FILED**  
05 JUL 15 PM 4:27  
STATE  
TALLAHASSEE, FLORIDA



06302005 No Chg-P CR2E034 (10/03)

4. FEI Number  
**65-1013055**



Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**MOSES, EDWARD A MD  
11161 N.W. 26TH DRIVE  
CORAL SPRINGS, FL 33065**

**DO NOT WRITE IN THIS SPACE**

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: 

(NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00  
Due by September 7, 2005**

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


In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	C
NAME	MOSES, EDWARD A
STREET ADDRESS	11161 NW 26 DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	PMD
NAME	MOSES, EDWARD F
STREET ADDRESS	11161 NW 26 DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	ST
NAME	MOSES, GLORIA
STREET ADDRESS	11161 NW 26 DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33065
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **Edward A. Moses** 6/29/05 (984) 344-0600

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

7. Robert JUL 15 2005