


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000042388</b> 1. Entity Name <b>HOLLY TRADING CORPORATION</b>	
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Principal Place of Business <b>4426 NE 8TH AVE. FORT LAUDERDALE, FL 33334</b>	Mailing Address <b>9868 SANDOLFOOT BLVD. #218 BOCA RATON, FL 33428</b>
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**DO NOT WRITE IN THIS SPACE**



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number <b>65-1002801</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**WU, PHILLIP  
9868 SANDOLFOOT BLVD. SUITE 218  
BOCA RATON, FL 33428**

**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  (NOTE: Registered Agent signature required when reinstating) DATE **2-8-07**

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P WU, MINDY 9868 SANDOLFOOT BLVD. #218 BOCA RATON, FL 33428</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP WU, PHILLIP 9868 SANDOLFOOT BLVD. #218 BOCA RATON, FL 33428</b>
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U00000630679  
02/20/07-80016-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  (NOTE: Registered Agent signature required when reinstating) DATE **2-8-07** Daytime Phone # **561-716-3887**