2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053239

TYSON, KEVIN

7795 SW 6 ST

FORT LAUDERDALE, FL 33324

Name:

Address:

City-St-Zip:

Entity Name: NATIONAL TRADE OF SOUTH FLORIDA, INC.

FILED Jan 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10458 W MCNAB RD TAMARAC, FL 33321 **Current Mailing Address: New Mailing Address:** PO BOX 16988 PLANTATION, FL 33318 FEI Number: 65-1025875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALLEN, GEORGE 7795 SW 6 ST FORT LAUDERDALE, FL 33324 US 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. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition DONNELLY, KEVIN Name: Name: 7795 SW. 6TH ST. Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33324 City-St-Zip: Title: Title: () Delete () Change () Addition COLLWELL, EDWARD Name: Name: 7795 SW 6 ST Address: Address: FORT LAUDERDALE, FL 33324 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition O'REILLY, PATRICK Name: Name: 7795 SW 6 ST Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33324 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition ALLEN, GEORGE Name: Name: Address: 7795 SW 6 ST Address: City-St-Zip: FORT LAUDERDALE, FL 33324 City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: KEVIN DONNELLY D 01/07/2009