

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000017692

FILED  
Mar 11, 2004  
Secretary of State

Entity Name: INTERPHARMA TRADE, INC.

## Current Principal Place of Business:

2550 NW 72 AVE  
SUITE 316  
MIAMI, FL 33122

## New Principal Place of Business:

4005 NW 114 AVE.  
SUITE 13  
MIAMI, FL 33178

## Current Mailing Address:

2550 NW 72 AVE  
SUITE 316  
MIAMI, FL 33122

## New Mailing Address:

4005 NW 114 AVE.  
SUITE 13  
MIAMI, FL 33178

FEI Number: 90-0009946

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MORALES, HUGO M  
2550 NW 72 AVE  
SUITE 316  
MIAMI, FL 33122

## Name and Address of New Registered Agent:

MORALES, HUGO M  
4005 NW 114 AVE.  
SUITE 13  
MIAMI, FL 33178

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:

03/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: MORALES, HUGO M  
Address: 2550 NW 72 AVE, SUITE 316  
City-St-Zip: MIAMI, FL 33122

Title: VSD ( ) Delete  
Name: MONASTERO, TAMARA  
Address: 2550 NW 72 AVE, SUITE 316  
City-St-Zip: MIAMI, FL 33122

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: MORALES, HUGO M  
Address: 4005 NW 114 AVE. SUITE 13  
City-St-Zip: MIAMI, FL 33178

Title: VSD (X) Change ( ) Addition  
Name: MONASTERO, TAMARA  
Address: 4005 NW 114 AVE. SUITE 13  
City-St-Zip: MIAMI, FL 33178

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: TAMARA MONASTERIO

VSD

03/11/2004

Electronic Signature of Signing Officer or Director

Date