## · 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **ANNUAL REPORT FILED** Mar 26, 2008 08:00 AM DOCUMENT # P94000078624 Secretary of State 1. Entity Name OUTSIDE TRADERS INC. Principal Place of Business Mailing Address 8220 NW 30TH TERRACE 8220 NW 30TH TERRACE MIAMI, FL 33122 MIAMI, FL 33122 US CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0531490 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEAL, MARCELO V DO NOT WRITE 1250 NE 94TH STREET MIAMI SHORES, FL 33138 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PDS TITLE LEAL, MARCELO V NAME STREET ADDRESS 1250 NE 94TH STREET CITY-ST-ZIP MIAMI SHORES, FL 33138 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

changed or on an attachment with an artifices, with all other like empowered.

SIGNATURE: / ALL SILLES / ARRELO / LEAR 03/24/08 / 36

12. I hereby certify that the information supplied with this filling 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 of 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CITY-ST-ZIP