

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000041293

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: TELECOMM TRADING INTERNATIONAL, CORPORATION

## Current Principal Place of Business:

3399 NW 72 AVE  
SUITE 216  
MIAMI, FL 33015

## New Principal Place of Business:

## Current Mailing Address:

16300 NE 19 AVE  
SUITE C  
NORTH MIAMI BEACH, FL 33162

## New Mailing Address:

16300 NE 19 AVE  
SUITE C  
NORTH MIAMI BEACH, FL 33162

FEI Number: 65-1015877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVA, FERNANDO  
16300 NE 19 AVENUE SUITE C  
NORTH MIAMI BEACH, FL 33162 US

## Name and Address of New Registered Agent:

SILVA, FERNANDO  
16300 NE 19 AVENUE  
STE C  
NORTH MIAMI BEACH, FL 33162 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: FERNANDO SILVA

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BARROS, HANNEKA  
Address: 3399 NW 72 AVE., SUITE 216  
City-St-Zip: MIAMI, FL 33015

Title: TD ( ) Delete  
Name: CARVAJAL, JOSE M  
Address: 3399 NW 72 AVE., SUITE 216  
City-St-Zip: MIAMI, FL 33015

Title: SD ( ) Delete  
Name: BARROS, HANNEKE  
Address: 3399 NW 72 AVE., SUITE 216  
City-St-Zip: MIAMI, FL 33015

Title: VD ( ) Delete  
Name: SABBAGH, WALID  
Address: 3399 NW 72 AVE., SUITE 216  
City-St-Zip: MIAMI, FL 33015

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: HANNEKA BARROS

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date