

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098304

Entity Name: REQUEST TRADING, INC.

FILED  
Apr 30, 2007  
Secretary of State

## Current Principal Place of Business:

245 SE 1ST STREET  
# 402  
MIAMI, FL 30131

## New Principal Place of Business:

## Current Mailing Address:

2230 NE 122ND ST  
NORTH MIAMI, FL 33181

## New Mailing Address:

FEI Number: 65-0877365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOPES, SOLANGE  
2230 NE 122ND ST  
NORTH MIAMI, FL 33181 US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: PEIXOTO, ANA MARIA  
Address: 2230 NE 122ND ST  
City-St-Zip: NORTH MIAMI, FL 33181

Title: D ( ) Delete  
Name: LOPES, SOLANGE  
Address: 245 SE 1ST STREET  
City-St-Zip: MIAMI, FL 30131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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.

SIGNATURE: PEIXOTO, ANA MARIA

D

04/30/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date