

2004 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 640679

1. Entity Name
ELECTRONICS TRADE CENTER, INC.



FILED
Apr 12, 2004 08:00 AM
Secretary of State

Principal Place of Business
2601B NW 104 CT
MIAMI, FL 33172 US

Mailing Address
2601B NW 104 CT
MIAMI, FL 33172 US



03032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1934463

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BENMERGUI, ISAAC
2601-B N.W. 104 CT.
MIAMI, FL 33172

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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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BENMERGUI, ISAAC 2601-B N.W. 104 CT. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VEGUILLA, LOURDES 2601-B N.W. 104 CT. MIAMI, FL 33172
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BENMERGUI, MARA 2601-B N.W. 104 CT. MIAMI, FL 33172
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04/12/04-80080-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lou Veuilla*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/04 (305) 591-9322
Date Daytime Phone #