2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827746

FILED Jan 05, 2004 Secretary of State

Entity Name: MENLO WORLDWIDE TRADE SERVICES, INC.

_	Principal Place	of Business:	New Principal P	lace of Business:
	VIEW AVE. ΓΟ, CA 94304	US		
Current N	lailing Addres	s:	New Mailing Ad	dress:
	VIEW AVENUE FO, CA 94304	US		
FEI Number	: 13-4926805	FEI Number Applied For()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	d Address of C	urrent Registered Agent:	Name and Addr	ess of New Registered Agent:
1201 HAYS SUITE 105 TALLAHAS The above	S STREET 5 SSEE, FL 3230 e named entity s			stered office or registered agent, or both,
in the State	e of Florida.			
SIGNATU		c Signature of Registered Age	>nt	 Date
Election Car		Trust Fund Contribution ().	511L	Date
OFFICER	S AND DIRECT	ORS:	ADDITIONS/CH	ANGES TO OFFICERS AND DIRECTORS
Title:		Delete	Title:	() Change () Addition
Name: Address: City-St-Zip:	O'CONNELL, DA 1 LAGOON DRI REDWOOD CIT	NIEL P VE, #400	Name: Address: City-St-Zip:	
Title: Name: Address:	PD () WILLIFORD, JC 1 LAGOON DRIV REDWOOD CIT	/E, #400	Title: Name: Address:	() Change () Addition
City-St-Zip:		Y, CA 94065	City-St-Zip:	
City-St-Zip: Title: Name: Address: City-St-Zip:		Delete BERHARD G.H. AVENUE	Title: AS Name: SCHN Address: 3240	(X) Change()Addition IOLLER, EBERHARD G.H. HILLVIEW AVENUE ALTO, CA
Title: Name: Address:	S () SCHMOLLER, E 3240 HILLVIEW PALO ALTO, CA	Delete BERHARD G.H. AVENUE Delete ERT C #400	Title: AS Name: SCHN Address: 3240	IOLLER, EBERHARD G.H. HILLVIEW AVENUE
Title: Name: Address: City-St-Zip: Title: Name: Address:	S () SCHMOLLER, E 3240 HILLVIEW PALO ALTO, CA VPSD () CONLON, ROBE 1 LAGOON DR. REDWOOD CIT	Delete BERHARD G.H. AVENUE Delete ERT C #400 Y, CA 94065 Delete THEODOR DRIVE #400	Title: AS Name: SCHN Address: 3240 City-St-Zip: PALO Title: Name: Address:	IOLLER, EBERHARD G.H. HILLVIEW AVENUE ALTO, CA

rierepy 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: EBERHARD G.H. SCHMOLLER AS 01/05/2004