

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006477

FILED
Jan 03, 2007
Secretary of State

Entity Name: TRADESHOW, INC.

Current Principal Place of Business:

5845 WYNN RD.
LAS VEGAS, NV 89118

New Principal Place of Business:

Current Mailing Address:

5845 WYNN RD.
LAS VEGAS, NV 89118

New Mailing Address:

FEI Number: 36-4499066 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SURETY ASSOCIATES, INC.
2110 HERSCHEL ST.
JACKSONVILLE, FL 32204 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: CD () Delete
Name: SUISSA, RONALD
Address: 360 OSER AVENUE
City-St-Zip: HAUPPAUGE, NY 11788

Title: P () Delete
Name: LEVY, GLENN
Address: 3455 WEST SUNSET ROAD SUITE C
City-St-Zip: LAS VEGAS, NV 89118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: LEVY, GLENN
Address: 5845 WYNN ROAD
City-St-Zip: LAS VEGAS, NV 89118

Title: SEC (X) Change () Addition
Name: SUISSA, RONALD
Address: 5845 WYNN ROAD
City-St-Zip: LAS VEGAS, NV 89118

I hereby certify that the information supplied with this filing does not qualify for the 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: GLENN LEVY

PRES

01/03/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date