

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001644

FILED
Apr 27, 2004
Secretary of State

Entity Name: ESTTRADE CONSULTING INC.

Current Principal Place of Business:

149-15 BEECH AVE.
FLUSHING, NY 11355

New Principal Place of Business:

Current Mailing Address:

1406 PALMETTO AVE
FORT MYERS, FL 333916

New Mailing Address:

13425 5 TH ST
FORT MYERS, FL 333905

FEI Number: 11-3566318

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOYCHIK, JIM
23196 MARSH LANDING BLVD.
ESTERO, FL 33928 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: CP () Delete
Name: AASMA, ALAR
Address: 1406 PALMETTO AVE.
City-St-Zip: FORT MYERS, FL 33916

Title: V () Delete
Name: KARRO, ANTTI
Address: 1406 PALMETTO AVE.
City-St-Zip: FORT MYERS, FL 33916

Title: S () Delete
Name: AASMA, RIINA
Address: 1406 PALMETTO AVE.
City-St-Zip: FORT MYERS, FL 33916

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: AASMA, ALAR
Address: 13425 5 TH ST
City-St-Zip: FORT MYERS, FL 33905

Title: V (X) Change () Addition
Name: AASMA, RIINA
Address: 13425 5 TH ST
City-St-Zip: FORT MYERS, FL 33905

Title: S (X) Change () Addition
Name: AASMA, RIINA
Address: 13425 5 TH ST
City-St-Zip: FORT MYERS, FL 33905

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: AASMA ALAR

CP

04/27/2004

Electronic Signature of Signing Officer or Director

Date