

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005100

FILED
Mar 31, 2009
Secretary of State

Entity Name: SARDELL TRADING CORPORATION

Current Principal Place of Business:

C/O OSCAR MERCADO
1960 N. COMMERCE PKWY, STE 4
WESTON, FL 33326

New Principal Place of Business:

1960 N. COMMERCE PKWY.
SUITE 4
WESTON, FL 33326

Current Mailing Address:

C/O OSCAR MERCADO
1960 N. COMMERCE PKWY, STE 4
WESTON, FL 33326

New Mailing Address:

1960 N. COMMERCE PKWY.
SUITE 4
WESTON, FL 33326

FEI Number: 65-1007463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERCADO, OSCAR VS
1325 PORTOFINO CIRCLE
SUITE 813
WESTON, FL 33326 US

Name and Address of New Registered Agent:

CLINE, JOHN VP
2001 BAYVIEW DRIVE
FORT LAUDERDALE, FL 33305 US

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: JOHN CLINE

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: MORALES DE MERCADO, KETTY
Address: MANOLO TAVARES JUSTO #26, URBANIZACION REA
City-St-Zip: SANTO DOMINGO, DOMINICAN REP,

Title: VS () Delete
Name: MERCADO, OSCAR
Address: 1325 PORTOFINO CIRCLE, SUITE 813
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: CLINE, JOHN
Address: 2001 BAYVIEW DRIVE
City-St-Zip: FORTLAUDERDALE, FL 33305

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: JOHN CLINE

VP

03/31/2009

Electronic Signature of Signing Officer or Director

Date