## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000006603

Entity Name: ALLWOODS TRADING COMPANY, LTD.

25400 US 19 NORTH, SUITE #118

CLEARWATER, FL 33763

Address: City-St-Zip: FILED Jan 27, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 25400 US 19 NORTH, SUITE #118 CLEARWATER, FL 33763 **Current Mailing Address: New Mailing Address:** 25400 US 19 NORTH, SUITE #118 CLEARWATER, FL 33763 FEI Number: 62-1801808 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEAL, ROBERT L 2780 MERLIN WAY CLEARWATER, FL 33761 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition LEAL, ROBERT L Name: Name: 25400 US 19 NORTH, SUITE #118 Address: Address: City-St-Zip: CLEARWATER, FL 33763 City-St-Zip: Title: VΡ Title: () Change () Addition ( ) Delete Name: ISRAEL, JONAS Name: PO BOX 15148, 88862 KOTA KINABALU Address: Address: SABAH, MALAYSIA, City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition LEAL, TERRI L Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT L. LEAL CPT 01/27/2005