## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000003657

Address:

City-St-Zip:

P.O. BOX 3535

LAKE TAHOE, NV 89449

Entity Name: PILOT TRADING COMPANY, INC

FILED Apr 18, 2007 Secretary of State

Littly Nai	ille. FILOT I	RADING COMPANT, INC.				
Current P	rincipal Plac	e of Business:	New Princ	New Principal Place of Business:		
308 DORLA CT. ZEPHYR COVE, NV 89448			STE 205	308 DORLA CT. STE 205 ZEPHYR COVE, NV 89448		
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
P. O. BOX 10107 ZEPHRY COVE, NV 89448				P. O. BOX 10107 ZEPHYR COVE, NV 89448		
FEI Number:	: 88-0244814	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	MERY, BRIEN RRY OAKS T FL 34114		8129 CAM	MONTGOMERY, BRIEN 8129 CAMELLA LANE TAMPA, FL 33647 US		
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered off	ïce or registered agent, or both,	
SIGNATUR	RE:			04/18/2007		
	Electro	nic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P ( SAUNDERS, G P. O. BOX 10 <sup>2</sup> ZEPHYR COV	07	Title: Name: Address: City-St-Zip:	()(	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( GURNER, JOH P. O. BOX 10° ZEPHYR COV	07	Title: Name: Address: City-St-Zip:	D (X) 0 BARKLEY, KATH P. O. BOX 3535 ZEPHYR COVE,		
Title: Name: Address: City-St-Zip:	SV ( HOLLIS, DAVI 2824 RIDGE T TRAVERS CIT	R DR	Title: Name: Address: City-St-Zip:	()(	Change ( ) Addition	
Title: Name:	D () BARKLEY, KA	() Delete THERINE	Title: Name:	( ) (	Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: GARY SAUNDERS P 04/18/2007