

# **2007 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F06000007347

**FILED**  
**Oct 10, 2007**  
**Secretary of State**

**Entity Name:** ROOCHI TRADERS INCORPORATED

**Current Principal Place of Business:**

16300 NW 49TH AVE  
MIAMI, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

6393 E WASHINGTON BLVD  
COMMERCE, CA 90040

**New Mailing Address:**

**FEI Number:** 95-4207415

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

AHAMJI, KAMBER ALI  
16300 NW 49TH AVE  
MIAMI, FL 33014 US

**Name and Address of New Registered Agent:**

HARSHAD, KOTHARI CPA  
14752 BEACH BLVD STE 205  
LA MIRADA, CA, FL 90638 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:** HARSHAD KOTHARI CPA

10/10/2007

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PT ( ) Delete  
**Name:** SACHDEVA, VIKRAM  
**Address:** 4692 AMALFI ST  
**City-St-Zip:** CYPRESS, CA 90630

**Title:** VPS ( ) Delete  
**Name:** SACHDEVA, NEERAJ  
**Address:** 2050 CHRISTIE ST  
**City-St-Zip:** FULLERTON, CA 92833

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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:** HARSHAD KOTHARI

CPA

10/10/2007

Electronic Signature of Signing Officer or Director

Date