

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002182

Entity Name: THAMES TRADING INC.

FILED
Feb 16, 2012
Secretary of State

Current Principal Place of Business:

509 SOUTH PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

509 SOUTH PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084

New Mailing Address:

FEI Number: 59-2946093 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAW, MICHAEL J
ENGLISH LANDING MARINA
509 SOUTH PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 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

OFFICERS AND DIRECTORS:

Title: D
Name: RAPHAEL, GEORGE
Address: GUNNS CAMP
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: VD
Name: HORNER, SARAH
Address: GUNNS CAMP
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: D
Name: MACKENZIE, JENNA
Address: GUNNS CAMP
City-St-Zip: B/BAG 33, MAUN, BOTSWANA,

Title: ST
Name: SHAW, MICHAEL J
Address: 5095 PONCE DE LEON BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: PFD
Name: STERLING, JAMES H FINANCI
Address: 509 S PONCE DE LEON BLVD
City-St-Zip: ST AUGUSTINE, FL 32084

I hereby 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 all other like empowered.

SIGNATURE: JAMES H STERLING

PFD

02/16/2012

Electronic Signature of Signing Officer or Director

_____ Date