


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006 08:00 AM
Secretary of State

DOCUMENT # F97000005683

1. Entity Name
WEIMAR TRADING CORP.



Principal Place of Business ONE S.E. THIRD AVENUE SUITE 2250 MIAMI, FL 33131	Mailing Address ONE S.E. THIRD AVENUE SUITE 2250 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



04252006 No Chg-F CR2E034 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**AMKGS REGISTERED AGENTS, INC.
 ONE S.E. THIRD AVENUE
 SUITE 2250
 MIAMI, FL 33131**

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000535613
 05/08/06-80057-020 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ABALLI, ARTURO J JR ONE S.E. THIRD AVENUE - SUITE 2250 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FERNANDEZ, CARIDAD ONE S.E. THIRD AVENUE - SUITE 2250 MIAMI, FL 33131
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: **4-25-06** DAYTIME PHONE #: **305-372-5920**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR