## 2008 FOR PROFIT CORPORATION

## **ANNUAL REPORT FILED** Jan 28, 2008 08:00 AM Secretary of State **DOCUMENT # G08675** 1. Entity Name KINGSTON-MIAMI TRADING COMPANY Mailing Address Principal Place of Business 1465 NW 21ST TERR 1465 NW 21ST TERR. MIAMI, FL 33142 US MIAMI, FL 33142 US 01202008 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2233518 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLOOM, KENNETH M DO NOT WRITE 1110 BRICKELL AVE 7TH FLOOR IN THIS SPACE MIAMI, FL 33131-3107 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. DAIL (1.0) Et l'Agratement Agent a gradum requireur at en ministrati Signature, types or onlines had endined aleres agent and the traps it asset 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. CEOS RRLE CHA FONG, CHRISTINE Y NAME STREET ADDRESS 2179 NW 73RD TERRACE PEMBROKE PINES, FL 33024 CITY-S1-ZIP U000000802107 PD HILL 02/01/08-80046-004 150.00 CHA FONG, PATRICK A NAME 2179 NW 73 RD TERRACE STREET ADDRESS PEMBROKE PINES, FL 33024 CITY-ST-7IP 11111 NAME STREET ADDRESS DO NOT WRITE CHIY-SI-ZIP IN THIS SPACE HHLE NAME STREET ADDRESS CITY-ST-ZIP THILL STREET ADDRESS CHY-SI-ZIP

12. Thereby certify that the information supplied with this filling 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 and address, with all other like empowered.

SIGNATURE:

HILLE NAME STREET ADDRESS CILY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/08

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