2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# G48694

Entity Name: P.K. TRADING COMPANY

Current Principal Place of Business:

88975 OVERSEAS HWY
ISLAMORADA, FL 33036 US

New Principal Place of Business:

3760 SOUTH 25TH STREET
FORT PIERCE, FL 34981 US

Current Mailing Address:

P.O BOX 9690
TAVERNIER, FL 33070

New Mailing Address:

P.O BOX 12579
FORT PIERCE, FL 34979

FEI Number: 59-2324836 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAW, PATRICIA K
210 OCEAN DRIVE
TAVERNIER, FL 33070 US

Name and Address of New Registered Agent:

SHAW, PATRICIA K
3760 SOUTH 25TH STREET
FORT PIERCE, FL 34981 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: PATRICIA K SHAW 04/27/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHAW, PATRICIA K.,
Address: 210 OCEAN DRIVE
City-St-Zip: TAVERNIER, FL 33070

Title: VS ( ) Delete
Name: SHAW, PATRICIA K.,
Address: 210 OCEAN DRIVE
City-St-Zip: TAVERNIER, FL 33070

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHAW, PATRICIA K.,
Address: 3760 SOUTH 25TH STREET
City-St-Zip: FORT PIERCE, FL 34981

Title: VS (X) Change ( ) Addition
Name: SHAW, PATRICIA K.,
Address: 3760 SOUTH 25TH STREET
City-St-Zip: FORT PIERCE, FL 34981

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA K SHAW PD 04/27/2005
Electronic Signature of Signing Officer or Director Date