2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G80269

Entity Name: LAMPE TRADING, INC.

FILED Feb 14, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3080 NE 47TH CT. P.O. BOX 510801

204 KEY COLONY BEACH, FL 33051 US

FORT LAUDERDALE, FL 333085209 US

Current Mailing Address: New Mailing Address:

3080 NE 47TH CT. P.O. BOX 510801

204 KEY COLONY BEACH, FL 33051 US

FORT LAUDERDALE, FL 333085209 US

FEI Number: 59-2368276 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAMPE, DONALD E
2200 S. OCEAN LANE #802

LAMPE, DONALD E
980 SHELTER BAY DR

FORT LAUDERDALE, FL 33316 US KEY COLONY BEACH, FL 33051 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: 02/14/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 LAMPE, DONALD E.,
 Name:
 LAMPE, DONALD E.,

 Address:
 2200 S. OCEAN LANE
 Address:
 P.O. BOX 510801

City-St-Zip: FORT LAUDERDALE, FL 33316 City-St-Zip: KEY COLONY BEACH, FL 33051

Title: VD () Delete Title: () Change () Addition

 Name:
 LAMPE, CLOTILDE R.,
 Name:

 Address:
 2200 S. OCEAN LANE #802
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33316
 City-St-Zip:

Title: SAT () Delete Title: SAT (X) Change () Addition

 Name:
 LAMAN, NANCY C.
 Name:
 LAMAN, NANCY C.

 Address:
 3080 N 47TH CT #204
 Address:
 P.O. BOX 510801

City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: KEY COLONY BEACH, FL 33051

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: DONALD E. LAMPE PD 02/14/2005