2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 12, 2005
Secretary of State

DOCUMENT# L04000052747

Entity Name: TRADESMITH SYSTEMS, LLC

Current Principal Place of Business:

4655 NW 97TH CT
DORAL, FL 331781980

New Principal Place of Business:

7601 N. FEDERAL HWY
STE 240B
BOCA RATON, FL 33487 US

Current Mailing Address:

4655 NW 97TH CT
DORAL, FL 331781980

New Mailing Address:

7601 N. FEDERAL HWY
STE 240B
BOCA RATON, FL 33487 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

A1A REGISTERED AGENT INC.
92 SADBERRY RD
QUINCY, FL 32351 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SJOBLOM, PRESTON L
Address: 4655 NW 97TH CT
City-St-Zip: DORAL, FL 331781980

Title: MGRM (X) Delete
Name: SJOBLOM, GLEN
Address: 4655 NW 97TH CT
City-St-Zip: DORAL, FL 331781980

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: SJOBLOM, PRESTON L
Address: 7601 N. FEDERAL HWY STE 240B
City-St-Zip: BOCA RATON, FL 33487 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PRESTON L. SJOBLOM MGRM 07/12/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date