


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2008 08:00 AM
Secretary of State

DOCUMENT # L24252
 1. Entity Name
 U.S. ELEVATOR TRADING COMPANY



Principal Place of Business Mailing Address
 9162 NW 148TH ST 9162 NW 148TH ST
 MIAMI LAKES, FL 33018 US MIAMI LAKES, FL 33018 US

DO NOT WRITE IN THIS SPACE



02122008 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
 65-0151321 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GUTIERREZ, HECTOR H.
 9162 NW 148TH ST
 MIAMI LAKES, FL 33018

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PS
NAME	GUTIERREZ, HECTOR H.
STREET ADDRESS	9162 NW 148TH ST
CITY- ST- ZIP	MIAMI LAKES, FL 33018
TITLE	D
NAME	SERRANO, R. JULIAN
STREET ADDRESS	9162 NW 148TH ST
CITY- ST- ZIP	MIAMI LAKES, FL 33018
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
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: _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date: 2/12/08 Daytime Phone #: 305-5577804