2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 26, 2004 08:00 AM Secretary of State ____**L68288** Entity Name **ETC. TRADING CORPORATION** Principal Place of Business Mailing Address 13220 S.W. 37TH TERR. 13220 S.W. 37TH TERR. MIAMI, FL 33175 MIAMI, FL 33175 04192004 20000000 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numb 65-0197720 Not Applicable \$8.75 00000000 X 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CONTRERAS, MIRIAM DO NOT WRITE 13220 S.W. 37 TERRACE MIAMI, FL 33175 IN THIS SPACE 3. 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campalon Financing \$5.00 0 00000 FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS U00000131603 10. BILE 04/27/04-80012-011 158.75 CONTRERAS, NUMA NAME 13220 SW 37TH TERR. STREET ADDRESS CETY-ST-7IP MIAMI, FL CONTRERAS, MIRIAM NAME STREET ADDRESS 13220 SW 37TH TERR. CSTY-ST-ZP MIAMI, FL NAME STREET ADDRESS DO NOT WRITE CRY-ST-ZP IN THIS SPACE me NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-70P TIBLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filing does not qualify 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 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 typice 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 attactiment with an address, with all other like empowered.

MIRIAM COUTRORAS 5D

Oate

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305)718-9296