

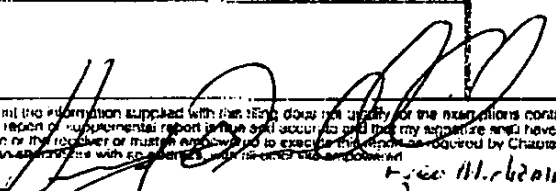
FROM : MASHOON

FAX NO. :

FILED
Aug 01, 2006 8:00 am
Secretary of State

08-01-2006 90001 022 ***158.75

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # M39025																																			
1. Entity Name REFRIAR TRADING CORP.																																			
Principal Place of Business 15545 MIAMI LAKES WAY BLDG #21 HAY 209 MIAMI LAKES, FL 33014		Mailing Address 15545 MIAMI LAKES WAY BLDG #21 HAY 209 MIAMI LAKES, FL 33014																																	
DO NOT WRITE IN THIS SPACE																																			
2. Name and Address of Current Registered Agent ARMELLA, HUGO M 15545 MIAMI LAKES WAY BLDG #21 HAY 209 MIAMI LAKES, FL 33014		DO NOT WRITE IN THIS SPACE																																	
3. This filer must only submit 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 _____ DATE _____																																			
FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$650.00		4. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May be Added to Fees																																	
10. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>PTS</td> </tr> <tr> <td>NAME</td> <td>ARMELLA, HUGO M</td> </tr> <tr> <td>STREET ADDRESS</td> <td>15545 MIAMI LAKES WAY., BLDG #21 HAY 209</td> </tr> <tr> <td>CITY, ST, ZIP</td> <td>MIAMI LAKES, FL 33014</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY, ST, ZIP</td> <td></td> </tr> </table>		TITLE	PTS	NAME	ARMELLA, HUGO M	STREET ADDRESS	15545 MIAMI LAKES WAY., BLDG #21 HAY 209	CITY, ST, ZIP	MIAMI LAKES, FL 33014	TITLE		NAME		STREET ADDRESS		CITY, ST, ZIP		TITLE		NAME		STREET ADDRESS		CITY, ST, ZIP		TITLE		NAME		STREET ADDRESS		CITY, ST, ZIP		1100000543206 05/13/06-80012-002 150.00 DO NOT WRITE IN THIS SPACE	
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12. I hereby certify that the information supplied with this filing does not violate the provisions contained in Chapter 119, Florida Statutes. I further certify that the information furnished on this report of supplemental report is true and accurate and that my signature and have the same legal effect as if made under oath; that I am an officer or director of the corporation or the partner or member and authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in block 10 or block 11 of this report, or on an amendment to this report, or on a statement of information.																																			
SIGNATURE: 		4/27/06 (306) 825-3178 DATE																																	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																			

20031460

04292006 No Chg-P CR2E034 (11/05)

 4. FEI Number
 59-2723971

 Applied For
 Not Applicable

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