2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2004
Secretary of State

DOCUMENT# P00000066257

Entity Name: J & F TRADE TOOLS, INC.

Current Principal Place of Business:

4500 NORTH HIATUS ROAD
SUITE 201
SUNRISE, FL 33351 US

New Principal Place of Business:

6675 S CARTIER DRIVE
GILBERT, AZ 85297 US

Current Mailing Address:

5841 N. PALM BAY PKWY.
TAMARAC, FL 33321

New Mailing Address:

6675 S CARTIER DRIVE
GILBERT, AZ 85297

FEI Number: 65-1021042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SECALIC, JON
5841 N. PALM BAY PKWY.
TAMARAC, FL 33321

Name and Address of New Registered Agent:

SECALIC, FRANK
4801 ROXBURY CT
BOYNTON BEACH, FL 33436

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: FRANK SECALIC 08/19/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SECALIC, JON
Address: 5841 N. PALM BAY PKWY.
City-St-Zip: TAMARAC, FL 33321

Title: ST ( ) Delete
Name: SECALIC, JON
Address: 5841 N. PALM BAY PKWY.
City-St-Zip: TAMARAC, FL 33321

Title: V ( ) Delete
Name: SECALIC, FABIEN
Address: 5841 N. PALM BAY PKWY.
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SECALIC, JON R
Address: 6675 S CARTIER DRIVE
City-St-Zip: GILBERT, AZ 85297

Title: ST (X) Change ( ) Addition
Name: SECALIC, JON R
Address: 6675 S CARTIER DRIVE
City-St-Zip: GILBERT, AZ 85297

Title: V (X) Change ( ) Addition
Name: SECALIC, FABIEN
Address: 6675 S CARTIER DRIVE
City-St-Zip: GILBERT, AZ 85297

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: FABIEN SECALIC V 08/19/2004
Electronic Signature of Signing Officer or Director Date