


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000095180	
1. Entity Name TRADEWINDS INTERNATIONALE RESOURCES, INC.	

Principal Place of Business 2335 RABBIT HOLLOWE CIRCLE, #100 DELRAY BEACH, FL 33445-6691	Mailing Address 2335 RABBIT HOLLOWE CIRCLE, #100 DELRAY BEACH, FL 33445-6691
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01052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 34-1779991	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**MAC ISAAC, SR., JAMES D
2335 RABBIT HOLLOWE CIRCLE, #100
DELRAY BEACH, FL 33445-6691**

DO NOT WRITE IN THIS SPACE

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, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MAC ISAAC, SR., JAMES D 2335 RABBIT HOLLOWE CIRCLE, #100 DELRAY BEACH, FL 334456691
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS MAC ISAAC, MARIETA A 2335 RABBIT HOLLOWE CIRCLE, #100 DELRAY BEACH, FL 334456691
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby 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 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: James D Mac Isaac Sr. **1-5-2004 561-638-0185**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #