

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000103352

Entity Name: IMART TRADING, INC.

FILED
Apr 25, 2005
Secretary of State

Current Principal Place of Business:

1607 SW 108TH WAY
DAVIE, FL 33324

New Principal Place of Business:

Current Mailing Address:

1607 SW 108TH WAY
DAVIE, FL 33324

New Mailing Address:

FEI Number: 65-1061326

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AKHTERUZZAMAN KHAN, MD
1607 SW 108 WAY
DAVIE, FL 33324 US

Name and Address of New Registered Agent:

KHAN, MD A P
1607 SW 108 WAY
DAVIE, FL 33324 US

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: MD AKHTERUZZAMAN KHAN

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: AKHTERUZZAMAN KHAN, MD
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

Title: T () Delete
Name: AKHTER, TASLIMA
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

Title: S () Delete
Name: KHAN, AFROZA AKHTAR
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KHAN, MD A P
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

Title: T (X) Change () Addition
Name: AKHTER, TASLIMA T
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

Title: S (X) Change () Addition
Name: KHAN, AFROZA A S
Address: 1607 SW 108 WAY
City-St-Zip: DAVIE, FL 33324

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: MD AKHTERUZZAMAN KHAN

P

04/25/2005

Electronic Signature of Signing Officer or Director

Date