FILED
Mar 11, 2003 8:00 am
Secretary of State

03-11-2003 90143 009 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000001116

1. Entity Name
TRADING FLOOR, INC.

Principal Place of Business
1621 CLEARVIEW AVE
CLEARWATER, FL 33756

Mailing Address
1621 CLEARVIEW AVE
CLEARWATER, FL 33756

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
2729 VIA MURANO	2729 VIA MURANO
Suite, Apt. #, etc. #425	Suite, Apt. #, etc. #425
City & State Clearwater, FL	City & State Clearwater, FL
Zip 33764 Country USA	Zip 33764 Country USA

4. FEI Number 59-3705444 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
SHULMAN, JOSHUA
1621 CLEARVIEW AVE
CLEARWATER, FL 33756

7. Name and Address of New Registered Agent
Name Joshua Shulman
Street Address (P.O. Box Number is Not Acceptable) 2729 VIA MURANO #425
City Clearwater FL Zip Code 33764

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 [signature] Joshua Shulman 03/04/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DEKLYN, WARD B III 502 SOUTH FREMONT AVE UNIT 810 TAMPA, FL 33606 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 1 ISLAND DR #7 E. NORWALK, CT 06855
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO SHULMAN, JOSHUA B 1621 CLEARVIEW AVE CLEARWATER, FL 33756 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 2729 VIA Murano #425 Clearwater, FL 33764
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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: [signature] Joshua Shulman 03/04/03 727-463-5474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #