


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 08, 2005 8:00 am
Secretary of State

07-08-2005 90021 047 ***150.00

DOCUMENT # P01000011432 1. Entity Name E&Y INTERNATIONAL TRADING, CORP.																																																																																																																													
Principal Place of Business 181 NW 97 AVE., #507 MIAMI, FL 33172			Mailing Address 181 NW 97 AVE., #507 MIAMI, FL 33172																																																																																																																										
2. Principal Place of Business 8150 NW 33 St. Suite, Apt. #, etc.			3. Mailing Address 8150 NW 33 St. Suite, Apt. #, etc.																																																																																																																										
City & State Miami, FL Zip 33122 Country			City & State Miami, FL Zip 33122 Country																																																																																																																										
4. FEI Number 65-1073288			Applied For Not Applicable																																																																																																																										
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			06282005 Chg-P CR2E034 (10/03)																																																																																																																										
6. Name and Address of Current Registered Agent PEREZ, ENRIQUE J 181 NW 97 AVE., #507 MIAMI, FL 33172			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																																																																																																																										
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																													
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																											
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">PD</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>PEREZ, ENRIQUE JOSE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>181 NW 97 AVE., #507</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33172</td> <td></td> </tr> <tr> <td>TITLE</td> <td>SD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>ORTIZ, YEIMY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>181 NW 97 AVE., #507</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>MIAMI, FL 33172</td> <td></td> </tr> <tr> <td>TITLE</td> <td>TD</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>DE PEREZ, JOSEFINA R</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>CALLE COMEOCO NO 100-52</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>VALENCIA, VENEZUELA</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II: 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	PD	<input type="checkbox"/> Delete	NAME	PEREZ, ENRIQUE JOSE		STREET ADDRESS	181 NW 97 AVE., #507		CITY-ST-ZIP	MIAMI, FL 33172		TITLE	SD	<input type="checkbox"/> Delete	NAME	ORTIZ, YEIMY		STREET ADDRESS	181 NW 97 AVE., #507		CITY-ST-ZIP	MIAMI, FL 33172		TITLE	TD	<input type="checkbox"/> Delete	NAME	DE PEREZ, JOSEFINA R		STREET ADDRESS	CALLE COMEOCO NO 100-52		CITY-ST-ZIP	VALENCIA, VENEZUELA		TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
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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: _____ 06/26/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																													

50055153



ATTACHMENT 50053753
E&Y INTERNATIONAL TRADING, CORP.

June 28, 2005

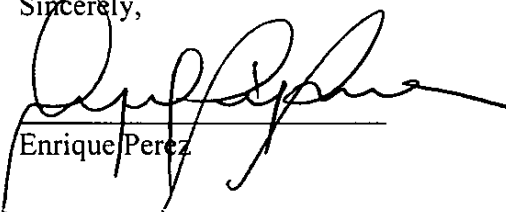
Division of Corporations
2670 Executive Center Circle Suite 100
Tallahassee, FL 32301

Reference: Porfit Corporation Annual Report
Document #: P01000011432

To Whom It May Concern:

We are attaching our profit annual report; we want to request you the exoneration filing late fee. We were not able to answer before because we were out of town and this made us to filing a few days later. We really appreciate any your forgiveness in this matter.

Sincerely,



Enrique Perez