## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032093

Entity Name: SOUTH DADE TRADE INTERPRISES CORP

FILED Apr 28, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13931 NW 27TH AVENUE 2345 WEST 52 STREET
OPA LOCKA, FL 33054 US HIALEAH, FL 33016 US

Current Mailing Address: New Mailing Address:

 13931 NW 27TH AVENUE
 2345 WEST 52 STREET

 OPA LOCKA, FL 33054
 US

 HIALEAH, FL 33016
 US

FEI Number: 65-1090165 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ACOSTA, LAZARO
561 EAST 46 ST
HIALEAH, FL 33013 US

ACOSTA, LAZARO
2263 KEYSTONE BOULEVARD
NORTH MIAMI, FL 33181 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: LAZARO ACOSTA 04/28/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: P () Delete Name: ACOSTA, LAZARO

Address: 561 EAST 46 STREET
City-St-Zip: HIALEAH, FL 33010 US

 Title:
 V
 ( ) Delete

 Name:
 ROJAS, NELSON

 Address:
 5786 WEST 26 AVE

 City-St-Zip:
 HIALEAH, FL 33016 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition

Name: ACOSTA, LAZARO

Address: 2263 KEYSTONE BOULEVARD City-St-Zip: NORTH MIAMI, FL 33010 US

Title: V (X) Change ( ) Addition

Name: ROJAS, NELSON Address: 1230 N.E. 82 STREET City-St-Zip: MIAMI, FL 33138 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: LAZARO ACOSTA P 04/28/2006