

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000032093

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: SOUTH DADE TRADE INTERPRISES CORP

**Current Principal Place of Business:**

2345 WEST 52 STREET  
HIALEAH, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

2345 WEST 52 STREET  
HIALEAH, FL 33016 US

**New Mailing Address:**

FEI Number: 65-1090165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ACOSTA, LAZARO  
2263 KEYSTONE BOULEVARD  
NORTH MIAMI, FL 33181 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ACOSTA, LAZARO  
Address: 2263 KEYSTONE BOULEVARD  
City-St-Zip: NORTH MIAMI, FL 33010 US

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

PTE

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date