

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087004

FILED  
Mar 03, 2004  
Secretary of State

Entity Name: ZORYN TRADING CORP.

**Current Principal Place of Business:**

3335 WEST 4 AVENUE  
HIALEAH, FL 33012

**New Principal Place of Business:**

13059 NW 42 AVENUE  
OPA LOCKA, FL 33054 US

**Current Mailing Address:**

P.O. BOX 820498  
PEMBROKE PINES, FL 33082

**New Mailing Address:**

FEI Number: 65-1140131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORA, ALBERTO  
3335 WEST 4 AVENUE  
HIALEAH, FL 33012 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: MORA, ALBERTO  
Address: 3335 WEST 4 AVENUE  
City-St-Zip: HIALEAH, FL 33012

Title: V ( ) Delete  
Name: MORA, ROSARIO  
Address: 3335 4 AVENUE  
City-St-Zip: HIALEAH, FL 33012

**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 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: ALBERTO MORA

P

03/03/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date