2004 FOR PROFIT CORPORATION

ANNUAL REPURI					May 04 2004 9:00 am				
DOCUMENT # P01000087208 1. Entity Name PACE TRADING, CORP.					May 04, 2004 8:00 am Secretary of State				
PACE TRADING, CORP.		a to the time				05-04-2004 9	0214 047 ***150.0)0	
Principal Plac	e of Business	Mailing Address							
3900 NW 79TH AVE 3900 NW 3		3900 NW 79TH AVE							
652		652							
		MIAMI, FL 33166 3. Mailing Address							
8249 NW 3674 Sr Suite, Apt. #, etc.		8249 NW 3674 Sr Suite, Apt. #, etc.							
Z10 City & State		210 City & State			04292004 4. FEI Number	Chg-P	CR2E034 (10/03) Applied For		
Zip 33166 Country		Zip 33 (1) Country			65-1137599 Not Applicabl 5. Certificate of Status Desired \$8.75 Additional				
351	66	33166					Fee Require	d	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
CANTERO, ELADIO					ELADIO CANTERO				
3900 NW 79TH AVE STE 652 MIAMI, FL 33166				Street Address (P.O. Box Number is Not Acceptable)					
	0		Ci	ty M	IAMI	·	FL Zip Cod	e3316C	
8. The above named entry 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 transfer and transfer agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.0	9. Election Campaig Trust Fund Contrib	_	, T	5.00 May Be ded to Fees				
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
TITLE	PD	Delete	TITLE	Q.G				☐ Addition	
NAME	CANTERO, ELADIO		NAME	ec		NIERO 36 TH SI	- H 310		
STREET ADDRESS	3900 NW 79TH AVE STE 652		STREET ADD		• • •		7 6		
CITY-ST-ZIP :	MIAMI, FL 331666550	***************************************	CITY-ST-Z	MI	OMI, FL	33166			
TITLE		☐ Delete	TITLE				Change	Addition	
NAME STREET ADDRESS	· .		NAME STREET ADI	noree					
CITY-ST-ZIP			CITY-ST-Z	I					
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NAME			NAME				_ •	_	
STREET ADDRESS			STREET ADI						
CITY - ST - ZIP			CITY-ST-Z						
12. I hereby of indicated of the corochanged.	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empt , or on an attachment with an address	this filing does not qualify for the true and accurate and that my wered to execute this report as lith all other like empowered.	he exemption signature serviced by the service of the serviced by the serviced by the serviced by the serviced by the service of the service	on stated in S shall have the by Chapter 60	ection 119.07(3)(i), same legal effect 17. Florida Statutes;	Florida Statutes. I as if made under o and that my name	further certify that the lipath; that I am an officer appears in Block 10 o	nformation or director Block 11 if	
SIGNAT	/ (1)	`1//	AN TER		,	1/04	. \	6647	
	SIGNATURE AND TYPED OR PL	TINTED NAME OF SIGNING OFFICER OF	DIRECTOR		• •	Oate	Daytime Phone #		

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