2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # P01000098742

INTERNATIONAL STRUCTURED TRADES

INCORPORATED

Principal Place of Business

MIAMI, FL 33131

C/O RICARDO I. SOUTO, ESQ. 201 S. BISCAYNE BLVD., STE. 1500

Mailing Address

C/O RICARDO I. SOUTO, ESQ. 201 S. BISCAYNE BLVD., STE. 1500 MIAMI, FL 33131

FILED Mar 04, 2004 08:00 AM Secretary of State



01262004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-1157556 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI 1600 MIAMI CENTER, SUITE 1500 (R/S) 201 S. BISCAYNE BLVD. MIAMI, FL 33131			DO NOT WRITE IN THIS SPACE		
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 Signature, typed or printed name of registered agent and tine if applicable (NOTE, Registered Agent signature required when relinstating) DATE					
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campai Trust Fund Confi			, 	\$5.00 May Be Added to Fees	U00000076348 03/04/04-80024-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT DT PEREZ, JOSE VELASCO 201 S, BISCAYNE BLVD., STE. 1500 MIAMI, FL 33131 DS PIEDRAS, JUAN ANTONIO 201 S, BISCAYNE BLVD., STE 1500 (MIAMI, FL 33131 DP MEMBRENO, BENJAMIN T 201 S, BISCAYNE BLVD., STE 1500 (MIAMI, FL 33131	(R/S)	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			IN THIS SPACE		
NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS					
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 I hereby certify that the info indicated on this report or s of the corporation or the red blied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes, I further certify that the information 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 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 attachn

SIGNATURE:

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose Velasco Perez, Director 1/20/04 305 355 6300