
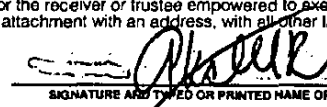


2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-24-2002 90054 038 ***150.00

DOCUMENT # P01000114354			
1. Entity Name A&J TRADING CORPORATION			
Principal Place of Business 995 SOUTHWEST 84TH AVENUE SUITE 120 MIAMI FL 33144		Mailing Address 995 SOUTHWEST 84TH AVENUE SUITE 120 MIAMI FL 33144	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-1156921		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI FL 33145		Name AKSELL RODRIGUEZ	
		Street Address (P.O. Box Number is Not Acceptable) 995 SW 84 Ave Ste 120	
		City Miami FL Zip Code 33144	
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.			
SIGNATURE 		DATE 3/6/02	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	
		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS			
TITLE	PO RODRIGUEZ, AKSELL <input type="checkbox"/> Delete 995 SOUTHWEST 84TH AVENUE MIAMI FL 33144		
TITLE	VD REYES, JENNY <input type="checkbox"/> Delete 995 SOUTHWEST 84TH AVENUE MIAMI FL 33144		
TITLE	STD AMOEDO, LEONOR S <input checked="" type="checkbox"/> Delete 995 SOUTHWEST 84TH AVENUE MIAMI FL 33144		
TITLE	<input type="checkbox"/> Delete		
TITLE	<input type="checkbox"/> Delete		
TITLE	<input type="checkbox"/> Delete		
TITLE	<input type="checkbox"/> Delete		
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.			
SIGNATURE: 		3/6/02 (305) 724-5804 Date Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E034 (9/01)