

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005354

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: CARLSONS TRADING INC.

## Current Principal Place of Business:

4815 NW 79TH AVE.  
SUITE 14  
DORAL, FL 33166

## New Principal Place of Business:

1325 NW 98TH COURT  
SUITE 14  
DORAL, FL 33172

## Current Mailing Address:

4815 NW 79TH AVE.  
SUITE 14  
DORAL, FL 33166

## New Mailing Address:

1325 NW 98TH COURT  
SUITE 14  
DORAL, FL 33172

FEI Number: 03-0375675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PRATS, GABRIEL  
2121 PONCE DE LEON BLVD.  
240  
CORAL GABLES, FL 33134 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: DPS ( ) Delete  
Name: PEREIRA, CARLOS A  
Address: 4815 NW 79TH AVE SUITE 14  
City-St-Zip: DORAL, FL 33166

Title: DT ( ) Delete  
Name: PEREIRA, FABIO A  
Address: 4815 NW 79TH AVE SUITE 14  
City-St-Zip: DORAL, FL 33166

Title: M ( ) Delete  
Name: PARREIRAS, LUIZ F  
Address: 4815 NW 79TH AVE. SUITE 14  
City-St-Zip: DORAL, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change ( ) Addition  
Name: PEREIRA, CARLOS A  
Address: 1325 NW 98TH COURT SUITE 14  
City-St-Zip: DORAL, FL 33172

Title: DT (X) Change ( ) Addition  
Name: PEREIRA, FABIO A  
Address: 1325 NW 79TH COURT SUITE 14  
City-St-Zip: DORAL, FL 33172

Title: M (X) Change ( ) Addition  
Name: PARREIRAS, LUIZ F  
Address: 10056 NW 41ST STREET  
City-St-Zip: DORAL, FL 33178

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: LUIZ F PARREIRAS

M

01/16/2009

Electronic Signature of Signing Officer or Director

Date