FILED

1. Entity Name ENERGY AND SERVICES TRADE, CORP.				03 MAY 12 AM 9:59		
·			GOO WE I	SECRETA	HY OF STATE ISEE, FLORIDA	
Principal Place of Business 600 W. HALLANDALE BCH. BLVD.		Mailing Address 600 W. HALLANDALE BCH, BLVD.		IALLAHAS	SEE. FLORIDA	
UNIT 6		UNIT 6				
HALLANDALE	FL 33009	HALLANDALE FL 33009				
2. Principal P	Place of Business	3. Mailing Address				
Suite, Apt. #, etc. Suite, Apt. #, etc.			1295			
500					☐ CHECK HERE IF MAKING CHANGES	
City & State HALLAWDOLL F.		City & State HALLANDALE PC.		4. FEI Number	Applied For Not Applicable	
zip 3350	OOF USA.	^{Zip} 33008	USA).	5. Certificate of Status Desire	d S8.75 Additional Fee Required	
	6. Name and Address of Current R	egistered Agent	Name (7. Name and Address of Ne	w Registered Agent	
SOBIA PEDRO E				engio knop	 	
600 W. HALLANDALE BCH. BLVD.				trees (P.O. Box Number is Not Accept	rb(o)	
				500		
HALLANDALE FL 33009			City)	Memorale	FL Zip Code	
8. The above	named entity submits this statement for	the purpose of changing its	<u></u>		FL 33005 Florida. I am familiar with, and accept	
the obligations of registered agent.						
SIGNATURE 104 20 2003						
<u> </u>	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered Agent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00				9. Election Campaign		
	Payable to Florida Department of	State		Trust Fund Contribu	ution. Added to Fees	
10.	OFFICERS AND D	DIRECTORS	11.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 11	
TITLE	PD	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS	Prada, Sergio 600 w. Hallandale BCH. BLVD.	LINIT 6	NAME STREET ADDRESS	200019		
CITY-ST-ZIP	HALLANDALE FL 33009	OMI O	CITY-ST-ZIP	05/22/030106	5030 **150.00	
TITLE	VD	☐ Delete	TITLE		Change Addition	
NAME STREET ADDRESS	OJEDA, GLORIA L 600 W. HALLANDALE BCH. BLVD.	I INIT C	NAME STREET ADDRESS			
CITY-ST-ZIP	HALLANDALE FL 33009	UNII 6	CITY-ST-ZIP			
TITLE	D	Delete	TITLE		☐ Change ☐ Addition	
NAME '-	SORIA, PEDRO E MANAGER	_ 7	NAME			
STREET ADDRESS CITY-ST-ZIP	600 W. HALLANDALE BCH. BLVD. HALLANDALE FL 33009	UNIT 6	STREET ADDRESS CITY-ST-ZIP		•	
TITLE	MALLANDALE FL 33009		TITLE		☐ Change ☐ Addition	
NAME	·	☐ Delete	NAME		C Strange C Audition	
STREET ADDRESS			STREET ADDRESS		!	
CITY-ST-ZIP		<u></u>	CITY-ST-ZIP			
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	-		
CITY-ST-ZIP			CITY-ST-ZIP			
TITLE		Delete	TITLE		☐ Change ☐ Addition	
NAME			NAME		_ • •	
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP			
12. I hereby of indicated of the cor	ertify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee emboy	his filing does not qualify for rue and accurate and that m vered to execute this report a	the exemption stated by signature shall have as required by Chapte	t in Section 119.07(3)(i), Florida Statute e the same legal effect as if made und er 607. Florida Statutes: and that my o	es. I further certify that the information er oath; that I am an officer or director ame appears in Block 10 or Block 11 if	

changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P02000010044

Daytime Phone #