2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# P02000030351

Entity Name: INTERCONTINENTAL CEMOR TRADING INC.

Current Principal Place of Business:

13911 NW 22 AVE
OPA LOCKA, FL

New Principal Place of Business:

Current Mailing Address:

13911 NW 22 AVE
OPA LOCKA, FL

New Mailing Address:

FEI Number: 80-0023768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESPINOSA, PATRICIA O ESQ
7599 NW 7 ST
MIAMI, FL 33126 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: VPD ( ) Delete
Name: MORATILLA MORENO, JOSE L DR.
Address: 8057 W 14 AVE E
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete
Name: MORALES, LUIS G
Address: 8057 W 14 AVE E
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete
Name: MORALES, NOEL
Address: 6190 W 19 AVE
City-St-Zip: HIALEAH, FL 33012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORALES, LUIS G PD
Address: 8057 W 14 AVE E
City-St-Zip: HIALEAH, FL 33014

Title: VPD (X) Change ( ) Addition
Name: MORALES, NOELVIS VPD
Address: 13911 NW 22 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D (X) Change ( ) Addition
Name: MORATILLA, JOSE LUIS D
Address: 13911 NW 22 AVE
City-St-Zip: OPA LOCKA, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LUIS G MORALES PD 04/26/2004

Electronic Signature of Signing Officer or Director — Date