

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90041 021 ***158.75

DOCUMENT # P02000053515	
1. Entity Name DEER TRADING CORP	

Principal Place of Business 1680 NW 82 AVE. MIAMI, FL 33126	Mailing Address 1680 NW 82 AVE MIAMI, FL 33126
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2. Principal Place of Business		3. Mailing Address 6115 Smoke Ridge Ln	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Cumming, GA	
Zip	Country	Zip	Country
33041	USA	30041	USA

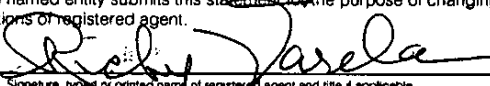
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01262006 Chg-P CR2E034 (11/05)

4. FEI Number 71-0885234		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent OLASCOAGA, RICARDO 1680 NW 82 AVE MIAMI, FL 33126		7. Name and Address of New Registered Agent Name Rick Varela Street Address (P.O. Box Number is Not Acceptable) 6520 SW 38 St City Miami FL Zip Code 33155

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

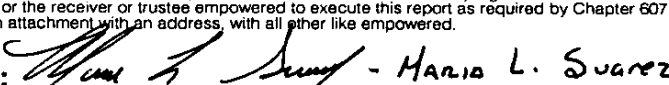
DATE **1/30/06**

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P OLASCOAGA, RICARDO 1680 NW 82 AVE MIAMI, FL 33126 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Ricardo Olascorga 6115 Smoke Ridge Ln Cumming, GA 30041 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SUAREZ, MARIA L 6115 SMOKE RIDGE LANE CUMMING, GA 30041 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLASCOAGA, RICHIE 1680 NW 82 AVE MIAMI, FL 33126 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OLASCOAGA, RICHIE 6115 Smoke Ridge Ln Cumming, GA 30041 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  - **MARIA L. SUAREZ**

DATE **1/30/06**

DAYTIME PHONE # **(305) 470-4555**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #