2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 30, 2005 08:00 AM Secretary of State

DOCUMENT # P02000090816 1. Enlity Name C.M. INVESTMENT & TRADING, CORP.								Secretary of State					
Principal Place of Business				Mailing Address									
141 NE 3RD. AVE. 401			8650 SW 212 STREET 104										
MIAMI, FL 33132			MIAMI, FL 33189					\$ 3 47 38 51 4 4 5 5 5	I SBAR IISA BBAR SBIILDI	EIN TSHS WAN TO	 	31 44 1 (3 342)	
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					03152005	Chg-P	CR2E0	34 (10/03)	<u>.</u> 2	
City & State			City & State			15		4. FEI Numb 03-047		ъ.		oplied For ot Applicable	
Zip	Country Zip		Zip Count		ntry				\$8.75 Add Fee Require				
	6, Name	and Address of Current	Regist	ered Agent	Name	7. Name and Address of New Registered Agent							
R&P ACCOUNTING & TAXES, INC.													
141 NE 3RD AVENUE SUITE 406					Street Address (P.O. Box Number is Not Acceptable)								
MIAMI, FL 33132											<u>.</u>		
			,	·	·	City			. ,	FL	Zip Cod	[
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											<u></u>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees													
10.		OFFICERS AND	DIREC		· · · · · · · · · · · · · · · · · · ·		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTOR!	S IN 11		
TITLE NAME	PSTD DE MONS	SALVE, MIRIAM J	Delete Title			- 1					☐ Change	☐ Addition	
STREET ADDRESS 8650 SW 212 STREET #104 CITY-ST-ZIP MIAMI, FL 33189					tet address (-ST-ZIP								
TITLE	VD VD	. 33109		Delete TITLE					<u> </u>	-(E-m)	☐ Change	☐ Addition	
NAME	MONSALVE, CARLOS				NAM	IE }		U0000034 825 9					
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TITLE NAME	GM TORRES,	, CAROLINA MANAGE	Delete	TITL: Nam	1					Change	Addition		
STREET ADDRESS CITY-ST-ZIP	NOORESS 8650 SW 212 STREET #104					ET ADDRESS							
TITLE	MIAIMI, FL	_ 33109	<u> </u>	☐ Delete	TITL	-ST-ZIP		<u> </u>		· <u> </u>	. Change	Addition	
NAME				LJ Dalet	NAM	E Ì					Onco.go		
STREET ADDRESS CITY-ST-ZIP				to the tax		ET ADDRESS -S1-ZIP							
TITLE				☐ Delete	בחוד	1			··	· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition	
NAME Street address												ł	
CITY-ST-ZIP	L			·	CITY	-ST-ZIP			<u></u>				
12. I hereby certify that the information supplied with this filling 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 empowerse 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: 04-28-05													
SIGNAT	OKE: _	A SCHATIME AND TYPED OR P	RINTED	NAME OF SIGNING OFFICER	OR DIRECT	тоя	· <u>+</u> =	UT.	Date	<u>الحد - ي = </u> و	aytime Phone #	<u> </u>	