2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000095886

1. Entity Name
1-C WHOLESALE TRADING, INC.

Principal Place of Business	Mailing Address
13796 SW 8TH ST MIAMI, FL 33184	13796 SW 8TH ST MIAMI, FL 33184

01282004   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
36-4507674	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

NIETO, ROSA
1720 SW 137 CT
MIAMI, FL 33175

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

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NIETO, ROSA
STREET ADDRESS	1720 S.W. 137 CT.
CITY-ST-ZIP	MIAMI, FL 33175
TITLE	SEC
NAME	NIETO, MARIA
STREET ADDRESS	1805 S.W. 107 AVE.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/29/04-80017-019 150.00

12. I hereby certify that the information supplied with this filing 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 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: _Rosa Nieto_   ROSA NIETO   3/25/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #