

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113321

Entity Name: ANDI TRADING COMPANY, INC.

FILED  
Mar 10, 2005  
Secretary of State

## Current Principal Place of Business:

8223 US HWY 301 N  
PARRISH, FL 34219

## New Principal Place of Business:

18107 COYOTE CREEK CT  
PARRISH, FL 34219

## Current Mailing Address:

18107 COYOTE CREEK COURT  
PARRISH, FL 34219

## New Mailing Address:

FEI Number: 57-1156038      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARUTHICAL, LOU  
18107 COYOTE CREEK COURT  
PARRISH, FL 34219      US

## Name and Address of New Registered Agent:

PARUTHICAL, LOU  
18107 COYOTE CREEK COURT  
PARRISH, FL 34219      US

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

03/10/2005

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: PARUTHICAL, LOU  
Address: 18107 COYOTE CREEK COURT  
City-St-Zip: PARRISH, FL 34219

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: PARUTHICAL, LOU  
Address: 18107 COYOTE CREEK COURT  
City-St-Zip: PARRISH, FL 34219

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: LOU PARUTHICAL

D

03/10/2005

Electronic Signature of Signing Officer or Director

Date