

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000123130

Entity Name: TRADORA CORPORATION

FILED
Apr 08, 2004
Secretary of State

Current Principal Place of Business:

613 OCEAN DRIVE
UNIT 10D
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

281 ISLAND DR
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: 56-2305805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ-CASTRO, AMADEO III
901 PONCE DE LEON BLVD SUITE 304
CORAL GABLES, FL 33134 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: PSD () Delete
Name: SALAZAR, WALDO
Address: 201 ALHAMBRA CIRCLE #201
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: DEL CAMPO, GUILLERMO G
Address: 2451 BRICKELL AVE #16N
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SALAZAR, WALDO
Address: 201 ALHAMBRA CIRCLE #901
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: WALDO SALAZAR

PSD

04/08/2004

Electronic Signature of Signing Officer or Director

Date