


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2004 8:00 am
Secretary of State

05-19-2004 90008 033 ***150.00

DOCUMENT # P03000002341	
1. Entity Name ROOTS GENERAL TRADING CORP.	

Principal Place of Business P.M.B # 676 MIAMI LAKES DR. MIAMI LAKES, FL 33014	Mailing Address P.M.B # 676 MIAMI LAKES DR. MIAMI LAKES, FL 33014
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2. Principal Place of Business 7333 MIAMI LAKES DR	3. Mailing Address 7333 MIAMI LAKES DR
Suite, Apt. #, etc. PMB #676	Suite, Apt. #, etc. PMB #676

City & State MIAMI LAKES FL	City & State MIAMI LAKES FL
Zip 33014-6997	Zip 33014-6997
Country U.S.	Country U.S.

05132004 Chg-P CR2E034 (10/03)

4. FEI Number 55-0813507	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MANSOUR, AHMAD 19030 NW 57 AVENUE 107 HIALEAH, FL 33015	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MANSOUR, AHMAD 19030 NW 57 AVENUE # 107 HIALEAH, FL 33015 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *A. Mansour* **05/14/04 (305) 776-8616**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

44045568

May 14, 2004

Division of Corporations
Uniform Business Reports
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Uniform Business Report
Roots General Trading Corp.
Certificate # P03000002341

Attached please find Uniform Business Report for the above mentioned corporation and the check in the amount of \$ 150.00 Fees.

Please accept the 150.00 Dollars payment and waive the penalty for being late for the year 2004, due to the fact that I did not received the annual renewal report

If further information is needed, please contact me.

Sincerely,



Ahmad Mansour
19030 NW 57th Avenue # 107
Hialeah, Florida 33015