## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000053656

Entity Name: TWO TRADES SUPPLIERS, INC.

FILED Apr 24, 2007 Secretary of State

| Current Principal Place of Business:                       |                         |                       | New Principal Place                | New Principal Place of Business:             |  |
|--|-------------------------|-----------------------|------------------------------------|--|--|
| 6722 ORCHARD LAKE<br>NEW PORT RICHEY,                      |                         | US                    |                                    |  |  |
| Current Mailing Address:                                   |                         | New Mailing Address:  |                                    |  |  |
| 6722 ORCHARD LAKE<br>NEW PORT RICHEY,                      |                         | US                    |                                    |  |  |
| FEI Number: 20-0129817                                     | FEI Nur                 | nber Applied For ( )  | FEI Number Not Applicable ( )      | Certificate of Status Desired ( )            |  |
| Name and Address o   | f Current R             | egistered Agent:      | Name and Address of                | New Registered Agent:                        |  |
| SEDILLO, MAUREENE<br>6722 ORCHARD LAKE<br>NEW PORT RICHEY, | ERD                     | US                    |                                    |  |  |
| The above named entilin the State of Florida.              | y submits t             | nis statement for the | purpose of changing its registered | l office or registered agent, or both,       |  |
| SIGNATURE:   |                         |                       |                                    |  |  |
| Electronic Signature of Registered Agent                   |                         |                       | ent                                | Date   |  |
| Election Campaign Financ                                   | ing Trust Fu            | nd Contribution ( ).  |                                    |  |  |
| OFFICERS AND DIRECTORS:                                    |                         |                       | ADDITIONS/CHANGE                   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
|  | () Delete<br>AUREEN PRI | ≣S                    | Title:<br>Name:                    | ( ) Change ( ) Addition                      |  |

Address: 6722 ORCHID RD.

City-St-Zip: NEW PORT RICHEY, FL 34653 US Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MAUREENE SEDILLO DIRE 04/24/2007