2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000057456

Address:

City-St-Zip:

2201 NW 75TH WAY

PEMBROKE PINES, FL 33024

FILED Aug 24, 2004 Secretary of State

Entity Name: IDEAL TRADING, INC. **Current Principal Place of Business: New Principal Place of Business:** 2146 NW 72 TERRACE 2201 NW 75 WAY PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 **Current Mailing Address: New Mailing Address:** 2146 NW 72 TERRACE 2201 NW 75 WAY PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 **FEI Number:** FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: ALCAZAR, SANDRA CORVAIA, IVETT 2201 N.W. 75TH WAY 2201 N.W. 75TH WAY PEMBROKE PINES, FL 33024 US PEMBROKE PINES, FL 33024 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: IVETT CORVAIA 08/24/2004 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition RUIZ, LUIS A Name: Name: 21212 NE 32 PLACE Address: Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: Title: Title: () Delete () Change () Addition Name: IZARRA, MARIA V Name: 21212 NE 32 PLACE Address: Address: AVENTURA, FL 33180 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition RUIZ, EDUARDO A Name: Name: 2201 NW 75TH WAY Address: Address: City-St-Zip: PEMBROKE PINES, FL 33024 City-St-Zip: Title: (X) Delete Title: () Change () Addition ALCAZAR, SANDRA L Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: LUIS A RUIZ D 08/24/2004