2004 FOR PROFIT CORPORATION ANNUAL REPORT FILED Apr 02, 2004 8:00 am

DOCUMENT # P03000081849							Secretary of State				
1. Entity Name RANDOM TRADING CORP.							04-02-2004	90022 00	9 ***15	0.00	
	e in Table					=					
Principal Place of Business 1000 NAUTICA DR WESTON, FL. 33327(2) - 9 \$ 50 \$ 40 \$ 70 \$ 70 \$ 70 \$ 70 \$ 70 \$ 70 \$ 7		Mailing Address 1000 NAUTICA DR WESTON, FL 33327				· ·	Ar of the			~~ ~ ~~	
2. Principal Pla		3. Mailing Address									
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Suite, Apt. #, etc.		Suite, Apt. #, etc.				02042004 Chg-P CR2E034 (10/03)					
City & State		City & State		4. FEI Number 20-0113758			Applied For Not Applicable				
Zip	Country	Zip	Coun	ntry		5. Certificate	of Status Desired		8.75 Add	itional	
:	6. Name and Address of Current	Registered Agent		Name		7. Name and	Address of New R		 		
TOVAR, ILEANA ARIAS ESQ						Address (P.O. Box Number is Not Acceptable)					
WESTON, F					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	O. Box Harris	от 13 тост госориали				
•				City		•	· · · · · · · · · · · · · · · · · · ·	FL	Zip Code	, ,	
8. The above n	named entity submits this statement fo	r the purpose of changing its	register	ed office or reg	gistere	d agent, or bo	th, in the State of Flo		,		
the obligations of registered agent.											
SIGNATURE	signature, typed or printed name of registered agent	and title if applicable. (NCT	E: Registere	ed Agent signature re	required w	fhen reinstating)		DATE	· · · · · · · · · · · · · · · · · · ·		
FILE NOW!!! FEE IS \$150.00 After May 1; 2004 Fee will be \$550.00 9. Election Campaign Financing Trust-Fund Contribution.						00 May Be d to Fees		-			
10.	OFFICERS AND	DIRECTORS	11.	1.		ADDITIONS	L CHANGES TO OFF	ICERS AND D	IRECTORS	IN 11	
	DPS RICCI, EMILIO	☐ Delete	TITL Nam	- 1	Y	-			Change	Addition	
l t	1000 NAUTICA DR WESTON, FL 33327			EET ADDRESS (+ST-ZIP				•			
	DVT	☐ Defete	TIΤ				· · · · · · · · · · · · · · · · · · ·	· · · C	Change	Addition	
STREET ADDRESS	DE RICCI, MARIA ACOSTA 1000 NAUTICA DR WESTON, FL 33327			rc Eet address /-st-zip						• •	
TITLE	VILGION, I L GGGZI	- Delete	ΠL	E		er .			Change	Addition	
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TITLE	• .	☐ Delete	TITE	E				[Change	Addition	
NAME Street Address			MAN STR	Æ EET ADDRESS							
		this filing Near not qualify for					() Electric Statutes		that the -	formatia -	
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section. 119.07(3)(ii) Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 at trusice 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR Date Date Date Date											