2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000027354

FILED Aug 18, 2005 Secretary of State

Entity Name: MPR INTERNATIONAL TRADE INC.							
Current Principal Place of Business:				New Principal Place of Business:			
1920 E HALLANDALE BLVD STE 701 HALLANDALE BCH, FL 33009			#	17555 COLLINS AVE # 702 SUNNY ISLES, FL 33160			
Current Mailing Address:				New Mailing Address:			
1920 E HALLANDALE BLVD STE 701 HALLANDALE BCH, FL 33009				17555 COLLINS AVE # 702 SUNNY ISLES, FL 33160			
FEI Number:		FEI Number Applied For ()	FEI Numb	er Not Appli	cable (X)	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BROOKS, ROBERT K 1920 E HALLANDALE BLVD STE 701 HALLANDALE BCH, FL 33009 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.							
SIGNATUR	E:						
Electronic Signature of Registered Agent Date							
		2)(b), F.S., the corporation did not r Frust Fund Contribution ().	receive the	e prior notice).		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	CHAIDOUROVA,	ALE BLVD STE 701	N A C	Fitle: Name: Address: City-St-Zip:	CHAIDOURC 17555 COLL SUNNY ISLE	INS AVE # 702 S, FL 33160	
Title: Name: Address: City-St-Zip:	() [relete	N A	Fitle: Name: Address: City-St-Zip:	BARONOV, E 17555 COLL	() Change (X) Addition BORIS INS AVE # 702 IS, FL 33160	
Title: Name: Address: City-St-Zip:	() [elete	N A	Fitle: Name: Address: Dity-St-Zip:	LYSENKO, N	AYNE BLVD. # 1005	

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: ELENA CHAIDOUROVA DP 08/18/2005