


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90373 032 ***150.00

DOCUMENT # P04000129012			
1. Entity Name ATILLA TREND INTERNATIONAL CORPORATION ATILLA TREND INTERNATIONAL CORPORATION			
Principal Place of Business 22280 FOUNTAIN LAKES BLVD APT 218 ESTERO FL 33928-4368		Mailing Address 22280 FOUNTAIN LAKES BLVD APT 218 ESTERO FL 33928-4368	
2. Principal Place of Business		3. Mailing Address 18,205 Baruch Dr.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State Ft. Myers	
Zip	Country	Zip	Country
		33912-6192	Lee



1st MOORE CR2E034 (10/04)

6. Name and Address of Current Registered Agent BARKO, BELA 22280 FOUNTAIN LAKES BLVD APT 218 ESTERO FL 33928-4368 18,205 Baruch Dr. Ft. Myers FL 33912-6192		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 *[Signature]* CEO
(NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO BARKO, BELA 22280 FOUNTAIN LAKES BLVD APT 218 ESTERO FL 33928-4368 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO-CFO-AGT Barko, Bela 18,205 Baruch Dr. Forth Myers, FL 33912-6192 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. President - Director Nehéz, Imre Korona ut 16. 8500 PAPA, HUNGARY. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. Barko, Attila 18,205 Baruch Dr. Ft. Myers, FL 33912-6192 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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: *[Signature]* **Bela Barko** April 8-05 (239) 337-1993
Date Daytime Phone #