

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000051162

FILED  
Apr 20, 2009  
Secretary of State

Entity Name: MMH TRADING CORPORATION

## Current Principal Place of Business:

7926 NW 66TH STREET  
MIAMI, FL 33166 US

## New Principal Place of Business:

55 N.E. 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 US

## Current Mailing Address:

55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334325500 US

## New Mailing Address:

55 N.E. 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 US

FEI Number: 65-1249097

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MONIQUE TRONCONE, CPA P.A.  
55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334325500 US

## Name and Address of New Registered Agent:

MONIQUE TRONCONE, CPA P.A.  
55 NE 5TH AVENUE  
SUITE 501  
BOCA RATON, FL 334324093 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: MONIQUE TRONCONE, CPA

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WILLIAMS, MARCOS M  
Address: 8333 NW 66TH STREET  
City-St-Zip: MIAMI, FL 33166 US

Title: V ( ) Delete  
Name: CASALI, HENRY E  
Address: 8333 NW 66TH STREET  
City-St-Zip: MIAMI, FL 33166 US

Title: T ( ) Delete  
Name: ARGERICH, MIGUEL A  
Address: 8333 NW 66TH STREET  
City-St-Zip: MIAMI, FL 33166 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
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: HENRY E CASALI

V

04/20/2009

Electronic Signature of Signing Officer or Director

Date