## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## May 07, 2008 08:00 AN Secretary of State **DOCUMENT # P05000093308** SOUTHGATE TRADE ADVISORS, INC. Principal Place of Business Mailing Address 6428 DORSAY CT 6428 DORSAY CT DELRAY BCH, FL 33484 DELRAY BCH, FL 33484 CR2E034 (11/05) 05052008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 56-2521846 Not Applicab \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 6. Name and Address of Current Registered Agent PEREZ. MANUEL DO NOT WRITE 6428 DORSAY COURT DELRAY BEACH, FL 33484 IN THIS SPACE 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and talle if applicable 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. **PRES** TITLE PEREZ, MANUEL NAME U00000949161 06/03/08-80017-006 150.00 6428 DORSAY CT STREET ADDRESS CITY-ST-ZIP DELRAY BCH, FL 33484 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE

FILED

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 is

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-7IP