

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127376

FILED
Apr 28, 2008
Secretary of State

Entity Name: DOUBLE M TRADING CORP.

Current Principal Place of Business:

112 SW PEACOCK BLVD., #205
PORT ST LUCIE, FL 34984

New Principal Place of Business:

152 SW PEACOCK BLVD., #201
PORT ST LUCIE, FL 34986

Current Mailing Address:

112 SW PEACOCK BLVD., #205
PORT ST LUCIE, FL 34984

New Mailing Address:

152 SW PEACOCK BLVD., #201
PORT ST LUCIE, FL 34986

FEI Number: 20-3478174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RODRIGUES, MIGUEL
1679 SW GEMINI LN
PORT ST LUCIE, FL 34984 US

Name and Address of New Registered Agent:

RODRIGUES, MIGUEL
152 SW PEACOCK BLVD # 201
PORT ST LUCIE, FL 34986 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: MIGUEL RODRIGUES

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RODRIGUES, MIGUEL
Address: 1679 SW GEMINI LN
City-St-Zip: PORT ST LUCIE, FL 34984

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RODRIGUES, MIGUEL
Address: 152 SW PEACOCK BLVD #201
City-St-Zip: PORT ST LUCIE, FL 34986

Title: VP () Change (X) Addition
Name: FERNANDES, MARGARIDA R
Address: 152 SW PEACOCK BLVD # 201
City-St-Zip: PORT SAINT LUCIE, FL 34986

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: MIGUEL RODRIGUES

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date