## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000125041

City-St-Zip:

HOLLYWOOD, FL 33020

FILED Jan 19, 2007 Secretary of State

Entity Name: E & D TRADING 2 INC.					
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
SUITE F	LING ROAD OOD, FL 33020				
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
2848 STIRLING ROAD SUITE F HOLLYWOOD, FL 33020					
FEI Number:	22-3943477	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US The above named entity submits this statement for the purpose				2848 STIRLING RD SUITE F HOLLYWOOD, FL 33020 US	
in the State	named entity st e of Florida.	omits this statement for the pu	irpose of changing its registered o	office of registered agent, or both,	
SIGNATURE: SHARONE MOSAYOV				01/19/2007	
	Electronic	Signature of Registered Ager	nt	Date	
Election Car	npaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () E MOSAYOV, SHAF 2848 STIRLING F HOLLYWOOD, F	ROAD #F	Title: ( Name: Address: City-St-Zip:	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () E MOSAYOV, DAVI 2848 STIRLING F HOLLYWOOD, F	ROAD #F	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address:	ST () E MOSAYOV, SEAN 2848 STIRLING F		Title: ( Name: Address:	) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: SHARONE MOSAYOV Ρ 01/19/2007