2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000031169

Entity Name: AKSA TRADING, INC.

FILED May 01, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
210 N. UNIVERSITY DRIVE				
707 CORAL SPRINGS, FL 33071				
Current Mailing Address:			New Mailing Address:	
240 N. LINIVEDCITY DDIVE				
210 N. UNIVERSITY DRIVE 707				
CORAL SPRINGS, FL 33071				
FEI Number: 2	20-8598151	FEI Number Applied For () FEI Number	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
SANDAGER, GLEN C 210 N UNIVERSITY DRIVE 707 CORAL SPRINGS, FL 33071 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:				
Electronic Signature of Registered Agent Date				
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.				
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () E SAEED, ARSHAE 4706 LAKESIDE DAVIE, FL 3331	CIRCLE EAST	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () E HANIF, SOHAIL 3955 N NOB HILI SUNRISE, FL 33		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () E GHANIWALA, W/ 13036 NW 14 ST PEMBROKE PIN	REET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () E KHATOON, BEGU 706 W BOYNTON BOYNTON BEAC	N BEACH BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D ()[USMAN, NAVEED 706 W BOYNTON BOYNTON BEAC	N BEACH BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition

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: ARSHAD SAEED P 05/01/2009