## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000061161

Address:

City-St-Zip:

652 TWINWOOD LOOP

ROSEVILLE, CA 95678

FILED Apr 14, 2008 Secretary of State

Entity Name: MOUSA TRADING INC. **Current Principal Place of Business: New Principal Place of Business:** 2100 NW 99 WAY SUNRISE, FL 33322 US **Current Mailing Address: New Mailing Address:** 2100 NW 99 WAY SUNRISE, FL 33322 US FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOUSA, KHALED 2100 NW 99 WAY SUNRISE, FL 33322 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO ( ) Delete Title: () Change () Addition Name: MOUSA, KHALED Name: 2100 NW 99 WAY Address: Address: City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: Title: VΡ Title: () Change () Addition () Delete ALBAKRY, NOUR Name: Name: 2100 NW 99 WAY Address: Address: SUNRISE, FL 33322 US City-St-Zip: City-St-Zip: Title: Title: (X) Change ( ) Addition VΡ ( ) Delete VΡ MOUSA, MOHAMMED MOUSA, MOHAMMED Name: Name: 652 TWINWOOD LOOP 2100 N W 99 WAY Address: Address: City-St-Zip: ROSEVILLE, CA 95678 US City-St-Zip: SUNRISE, FL 33322 US Title: VΡ ( ) Delete Title: VΡ (X) Change ( ) Addition MOUSA, REHAM MOUSA, REHAM Name: Name:

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.

Address:

City-St-Zip:

2100 NW 99 WAY

SUNRISE, FL 33322

SIGNATURE: KHALED MOUSA CEO 04/14/2008