## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000071600

DA FONSECÀ, SILVANA V

2121 S. OCEAN BLVD., APT. # 502

POMPANO BEACH, FL 33062 US

Name:

Address:

City-St-Zip:

Entity Name: WSF INTERNATIONAL TRADINGS, INC.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:		
120 E. OAI SUITE 105	KLAND PARI	K BLVD.					
FT. LAUDE	ERDALE, FL	33334	US				
Current Mailing Address:				New Mailing Address:			
	LAND PARK BLVD.				2121 SOUTH OCEAN BLVD		
SUITE 105 FT. LAUDE	RDALE, FL 33334 US			# 502 POMPANO BEACH, FL 33062 US			
FEI Number:	56-2667550	FEI N	umber Applied For()	FEI Nur	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
SUITE 105	KLAND PARI		JS				
	named entity of Florida.	submits	this statement for the p	urpose o	of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Agent				∍nt	Date		
Election Car	npaign Financi	ng Trust F	und Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P,VP ( DA FONSECA 2121 S. OCEA POMPANO BE	AN BLVD.,	APT. # 502		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S,T ( DA FONSECA 2121 S. OCEA POMPANO BE	ÁN BLVD.,	APT. # 502		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title <sup>.</sup>	D (	) Delete			Title:	( ) 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.

Name:

Address:

City-St-Zip:

SIGNATURE: SILVANA DA-FONSECA P.VP 04/14/2008