2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000089193

Entity Name: PEKINO TRADING, INC.

FILED Aug 19, 2008 Secretary of State

Littly Nai	ile. FERINO I	RADING, INC.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
1215 AQUI CELEBRA	ILA LOOP TION, FL 3474	7				
Current Mailing Address:			New Maili	New Mailing Address:		
	NE STREET TION, FL 3474	.7				
FEI Number:	26-0710610	FEI Number Applied For()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:	
	, LISA J INE STREET TION, FL 3474	17 US				
	named entity s e of Florida.	submits this statement for the p	urpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUR	⊋E.					
Electronic Signature of Registered Agent			nt		Date	
		3(2)(b), F.S., the corporation did no	t receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:			Title: Name: Address: City-St-Zip:	HASSAN HO	(X) Change () Addition SNY, MOHAMED M A LOOP DN, FL 34747	
Title: Name: Address: City-St-Zip:	P,D () GILMORE, DAV 914 JASMINE S CELEBRATION,	TREET	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	VP,T () HASSAN HOSNI 1215 AQUILA LO CELEBRATION,	OOP	Title: Name: Address: City-St-Zip:	HASSAN HO	(X) Change () Addition SNY, REBECCA A LOOP DN, FL 34747	
Title: Name: Address: City-St-Zip:	VP,S () GILMORE, LISA 914 JASMINE S CELEBRATION,	TREET	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: M HASSAN HOSNY MR 08/19/2008