

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000122747

FILED  
Sep 17, 2010  
Secretary of State

**Entity Name:** TRADING BUSINESS ENTERPRISE, INC.

**Current Principal Place of Business:**

7200 LAKE ELLENOR DR, STE 114  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**Current Mailing Address:**

7200 LAKE ELLENOR DR, STE 114  
ORLANDO, FL 32809 US

**New Mailing Address:**

6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 US

**FEI Number:** 26-1407685

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRAIL  
603  
ORLANDO, FL 32809 US

**Name and Address of New Registered Agent:**

SAFETY BUSINESS LLC  
6220 S ORANGE BLOSSOM TRAIL  
604  
ORLANDO, FL 32809 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: CRISTINA RIVERA

09/17/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: CASILLO, SOLANGE A  
Address: RUA DR MANUEL DE PAIVA RAMOS, 60/54  
City-St-Zip: SAO PAULO, SP 05351-015 BR

Title: DS  
Name: DE PINHO, ARIELLA S  
Address: 2412 ABBY DR, STE 102  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: DT  
Name: CASILLO, VITOR P  
Address: 2412 ABBY DR, STE 102  
City-St-Zip: KISSIMMEE, FL 34741 US

I hereby 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 all other like empowered.

SIGNATURE: VITOR P CASILLO

DT

09/17/2010

Electronic Signature of Signing Officer or Director

Date