## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000033098

Entity Name: R ONE TRADING INTERNATIONAL INC.

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4005 NW 114TH AVE 4470 MAHOGANY RIDGE WESTON, FL 33331 U

8 WESTON, FL 33331 DORAL, FL 33178 US

Current Mailing Address: New Mailing Address:

4470 MAHOGANY RIDGE WESTON, FL 33331 US

FEI Number: 26-2300352 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ELBAZ SALAMA, ELIAS MLP FINANCIAL GROUP INC. 4470 MAHOGANY RIDGE 4005 NW 114 AVE WESTON, FL 33178 US 5 MIAMI, FL 33178 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: SALVADOR DIPP 03/19/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: PD (X) Change ( ) Addition Name: ELBAZ SALAMA, ELIAS Name: ELBAZ SALAMA, ELIAS

Name: ELBAZ SALAMA, ELIAS Name: ELBAZ SALAMA, ELIAS Address: 4470 MAHOGANY RIDGE Address: 4470 MAHOGANY RIDGE City-St-Zip: WESTON, FL 33331 FL City-St-Zip: WESTON, FL 33331 FL

Title: S (X) Delete Title: ( ) Change ( ) Addition

 Name:
 MORA MEJIAS, JANNETH C
 Name:

 Address:
 16051 BLATT BOULEVARD SUITE # 405
 Address:

 City-St-Zip:
 WESTON, FL 33326 FL
 City-St-Zip:

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: ELIAS ELBAZ SALAMA PD 03/19/2009