

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000045533

FILED
May 01, 2009
Secretary of State

Entity Name: NATURAL TRADES FARMING OPERATION INC

Current Principal Place of Business:

555 NE 15 ST
SUITE 200
MIAMI, FL 33132 US

New Principal Place of Business:

5440 N STATE RD 7 STE 207
STE 207
FT LAUDERDALE, FL 33319 US

Current Mailing Address:

555 NE 15 ST
SUITE 200
MIAMI, FL 33132 US

New Mailing Address:

5440 N STATE RD 7 STE 207
STE 207
FT LAUDERDALE, FL 33319 US

FEI Number: 26-2588565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHACON, CARMEN
555 NE 15 ST
SUITE 200
MIAMI, FL 33132 US

Name and Address of New Registered Agent:

CHACON, CARMEN
5440 N STATE RD 7
STE 207
FT LAUDERDALE, FL 33319 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: CARMEN CHACON

05/01/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CHACON, CARMEN
Address: 555 NE 15TH ST
City-St-Zip: SUITE 200, FL 33132 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CHACON, CARMEN
Address: 5440 N STATE RD 7
City-St-Zip: STE 207, FL 33319 US

Title: D () Change (X) Addition
Name: NUNEZ, LUIS F
Address: 5440 N STATE RD 7 STE 207
City-St-Zip: FT LAUDERDALE, FL 33319 US

Title: D () Change (X) Addition
Name: AMOTECH S.A.
Address: CALLE 72 #8-35 EDF DON ANTONIO
City-St-Zip: MARACAIBO, ZL 1010 VZ

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: CARMEN CHACON

D

05/01/2009

Electronic Signature of Signing Officer or Director

Date