

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000018022

Entity Name: CONCEPT TRADING INC.

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

3300 UNIVERSITY DR
321
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

5714 N UNIVERSITY DRIVE
TAMARAC, FL 33321 US

Current Mailing Address:

3300 UNIVERSITY DR
321
CORAL SPRINGS, FL 33065 US

New Mailing Address:

5714 N UNIVERSITY DRIVE
TAMARAC, FL 33321 US

FEI Number: 65-0392545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAKHANI, MOHAMMAD I
3300 UNIVERSITY DR #321
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

LAKHANI, MOHAMMAD I
5714 N UNIVERSITY DRIVE
TAMARAC, FL 33321 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: MOHAMMAD I LAKHANI

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAKHANI, MOHAMMAD I
Address: 3300 UNIVERSITY DR #321
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VS () Delete
Name: LAKHANI, ALMAS
Address: 3300 UNIVERSITY DR #321
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAKHANI, MOHAMMAD I
Address: 5714 N UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

Title: VS (X) Change () Addition
Name: LAKHANI, ALMAS
Address: 5714 N UNIVERSITY DRIVE
City-St-Zip: TAMARAC, FL 33321

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MOHAMMAD I LAKHANI

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date