


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2005 08:00 AM
Secretary of State

DOCUMENT # P94000018277 1. Entity Name JAH TRADING CORP.	
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Principal Place of Business 936 INTRACOASTAL DR., #16C FT. LAUDERDALE, FL 33304 US	Mailing Address % TRIANGOLO PROF. GRP INC. 6196 NW 11TH ST SUNRISE, FL 33313
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01052005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0491479	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent TRIANGOLO, E P 6196 NW 11TH ST SUNRISE, FL 33313	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		<p>U00000233634 02/17/05-80046-012 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HEDDERICH, GUILLERMO 936 INTRACOASTAL DR. NO. 16-C FT. LAUDERDALE, FL 33304	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HEDDERICH, JOSE A 936 INTRACOASTAL DR. NO. 16-C FT. LAUDERDALE, FL 33304	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Guillermo Hedderich* 2/16/05 954 6825988
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #