


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P94000063544 |  |
| 1. Entity Name ADVANCED DESIGN TRADING CORP. | |

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| Principal Place of Business 9745 SUNSET DRIVE SUITE 201 MIAMI, FL 33173-4649 | Mailing Address 9745 SUNSET DRIVE SUITE 201 MIAMI, FL 33173-4649 |
|--|--|

DO NOT WRITE IN THIS SPACE



02212004 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-0516467 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

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| 6. Name and Address of Current Registered Agent FERNANDEZ, JAIME 9745 SUNSET DRIVE SUITE 201 MIAMI, FL 33173-4649 |
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**DO NOT WRITE
IN THIS SPACE**

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.

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

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 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 | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD VIEIRA, SILVINO C 9745 SUNSET DR. #201 MIAMI, FL 331734649 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD VIEIRA, MANUEL R 9745 SUNSET DR. #201 MIAMI, FL 331734649 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD VIEIRA, SERGIO C 9745 SUNSET DR. #201 MIAMI, FL 331734649 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

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03/08/04-80106-011 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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.

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|--|---------------------------------------|------------------------|--------------------------------------|
| SIGNATURE:  | Silvino C. Vieira President | Date: 2/21/2004 | Daytime Phone #: 305-279-1411 |
|--|---------------------------------------|------------------------|--------------------------------------|