## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P95000029977

**Entity Name:** HORIZON TRADING INTERNATIONAL, INC.

FILED Apr 20, 2004 Secretary of State

US

US

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

9025 MANCHESTER LANE 323 HITCHING POST ROAD CAPE CANAVERAL, FL 32920

SUITE C

MELBOURNE, FL 32904

**New Mailing Address: Current Mailing Address:** 

PO BOX 120340 323 HITCHING POST ROAD

MELBOURNE, FL 32904 US CAPE CANAVERAL, FL 32920 US

FEI Number: 59-3313697 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SALBERT, WILLIAM L SALBERT, WILLIAM L 323 HITCHING POST ROAD 9025 MANCHESTER LANE CAPE CANAVERAL, FL 32920 SUITE C

MELBOURNE, FL 32904 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: 04/20/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition SALBER, WILLIAM L Name: Name: SALBER, WILLIAM L

9025 C MANCHESTER LANE 323 HITCHING POST ROAD Address: Address: City-St-Zip: MELBOURNE, FL 32904 City-St-Zip: CAPE CANAVERAL, FL 32920

DVP Title: Title: ( ) Delete () Change () Addition Name: SALBER, TERENCE W Name:

560 VENETIAN WAY Address: Address: MERRITT ISLAND, FL 32953 City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: DVP () Change () Addition

MADRIGAL, LYNN R Name: Name: 1501 WESTMORELAND DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip:

Title: DVP () Delete Title: () Change () Addition

COX, JUDITH A Name: Name: Address: 904 DOGWOOD AVE. Address: City-St-Zip: DAPHNE, FL 32526 City-St-Zip:

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: WILLIAM L. SALBER **PRES** 04/20/2004