


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P95000039249</b> 1. Entity Name <b>AMERICAN TRADING INTERNATIONAL, INC.</b>	
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Principal Place of Business <b>129 E. DANIA BEACH BLVD. DANIA, FL 33004</b>	Mailing Address <b>129 E. DANIA BEACH BLVD. DANIA, FL 33004</b>
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**DO NOT WRITE IN THIS SPACE**

FILED  
2004 MAY 25 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



05212004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0584840</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
**GUPTA, CHANDER  
129 E. DANIA BEACH BLVD.  
DANIA, FL 33004**

**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.

SIGNATURE  DATE 4/30/04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>000037338960</b> <b>05/26/04--01047--026 **550.00</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GUPTA, CHANDER 129 E. DANIA BEACH BLVD. DANIA, FL 33004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUPTA, KIRAN 129 EAST DANIA BEACH BLVD DANIA, FL 33004
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IN THIS SPACE**

*Vkm  
5/25*

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.

SIGNATURE:  DATE 4/30/04 DAYTIME PHONE # 954 929-4633  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR