

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000004617

FILED
Mar 17, 2004
Secretary of State

Entity Name: EAST MEETS WEST TRADING COMPANY

Current Principal Place of Business:

3545 KENDALL RD
ROTONDA, FL 33947 US

New Principal Place of Business:

Current Mailing Address:

3545 KENDALL RD
ROTONDA, FL 33947 US

New Mailing Address:

FEI Number: 65-0635883 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGLES, CHARLES R
3545 KENDALL RD
ROTONDA, FL 33947 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: AGLES, CHARLES R
Address: PO BOX 1390, 410 EAST RAILROAD AVE
City-St-Zip: BOCA GRANDE, FL 33921

Title: D () Delete
Name: CARLEY, JEFFREY G
Address: 3731 EASTBOURNE
City-St-Zip: TROY, MI 48084

Title: D () Delete
Name: NESSER, PATRICIA A
Address: 13110 PLACIDA POINT CT.
City-St-Zip: PLACIDA, FL 33946

Title: D () Delete
Name: CARLEY, MARY A
Address: 3731 EASTBOURNE
City-St-Zip: TROY, MI 48084

Title: D () Delete
Name: VONSTAATS, ROSELLE L
Address: 9 SUNSET AVE.
City-St-Zip: OLD SAYBROOK, CT 06475

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: VONSTAATS, ROSELLE L
Address: 13110 PLACIDA POINTE CT
City-St-Zip: PLACIDA, FL 33946

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: CHARLES R AGLES

PRES

03/17/2004

Electronic Signature of Signing Officer or Director

_____ Date