

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000025201

FILED
Apr 28, 2004
Secretary of State

Entity Name: GULF WESTERN TRADING LTD. INTERNATIONAL CORPORATION

Current Principal Place of Business:

613 OCEAN DRIVE STE 8C
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

613 OCEAN DRIVE STE 8C
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HECHT, ALAN R
2670 NE 215 STREET
MIAMI, FL 33180 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: CD () Delete
Name: FOGLER, EDWARD N
Address: 613 OCEAN DRIVE STE 8C
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PD () Delete
Name: FOGLER, EDWARD N
Address: 613 OCEAN DR 8C
City-St-Zip: KEY BISCAYNE, FL 33149

Title: SDT () Delete
Name: BOSWORTH, JEANNETTE
Address: 613 OCEAN DR 8C
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: FOGLER, YOLANDA
Address: 613 OCEAN DR. 8C
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D () Delete
Name: BOSWORTH, CHRISTOPHER
Address: C/O FOGLER, 613 OCEAN DR. 8C
City-St-Zip: KEY BISCAYNE, FL 33149

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: () Change () Addition
Name:
Address:
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: COL. EDWARD N. FOGLER

PRES

04/28/2004

Electronic Signature of Signing Officer or Director

_____ Date