AMENDED

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000064845

1. Entity Name
AD & RD TRADING, INC.

FILED
05 DEC 20 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
9737 NW 41 ST MIAMI, FL 33178 US	9737 NW 41 ST BOX 276 MIAMI, FL 33178 US

04222005 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
	9737 NW. HIST St
Suite, Apt. #, etc.	Suite, Apt. #, etc. PMB 465
City & State	City & State Miami FL.
Zip / Country	Zip 33178 / Country USA

4. FEI Number 65-0590482 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
JHANGIMAL, SONIA D 9737 NW 41 ST MIAMI, FL 33178	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSTD JHANGIMAL, SONIA D 9737 NW 41 ST MIAMI, FL 33178	☒ Delete	P T JHANGIMAL, DIPU 9737 NW HIST MIAMI, FL 33178	☒ Change ☒ Addition
		☐ Delete	S D JHANGIMAL. SONIA 9737 NW HIST ST MIAMI. FL 33178	☐ Change ☒ Addition
		☐ Delete	400062291044 12/20/05--01030--008 **61.25	☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
	12/21	☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

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: Sonia D. Jhangimal 12/05/05 305-418-8922
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #