


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90141 047 ***150.00

DOCUMENT # P98000008793 1. Entity Name DVI TRADING CORP.	
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Principal Place of Business 2871 SOMERSET DRIVE APT # H-410 LAUDERDALE LAKES, FL 33311 US	Mailing Address 2871 SOMERSET DR. APT H-410 H-410 LAUDERDALE LAKES, FL 33311 US
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DO NOT WRITE IN THIS SPACE



04072005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0810607	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VOLPINI, DANIEL
2871 SOMERSET DRIVE
APT #H-410
LAUDERDALE LAKES, FL 33311

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P VOLPINI, DANIEL 2871 SOMERSET DR APT #H-410 LAUDERDALE LAKES, FL 33311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VINES VOLPINI 2871 SOMERSET DR APT H-410 LAUDERDALE LAKES, FL 33311
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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: _____ **04/18/2005** **(305) 992 4662**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #