


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 10, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P9800Q034465</b> 1. Entity Name <b>TRADE UNIVERSAL, CORP.</b>	
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Principal Place of Business <b>4210 NW 35 COURT MIAMI, FL 33142</b>	Mailing Address <b>4210 NW 35 COURT MIAMI, FL 33142</b>
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**DO NOT WRITE IN THIS SPACE**



05052004 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-0870895</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>CORADO, PEDRO 4210 NW 35 COURT MIAMI, FL 33142</b>
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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 registering) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 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	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PVST CORADO, PEDRO 15906 SW 17 STREET DAVIE, FL 33326</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D CORADO, PEDRO 15906 SW 17 STREET DAVIE, FL 33326</b>
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05/10/04-80010-016 150.00

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:** *Ronaco* **5/5/04 (305) 637-1660**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #