

2004 FOR PROFIT CORPORATION ANNUAL REPORT


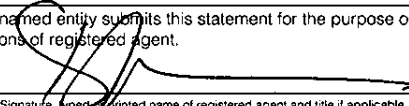
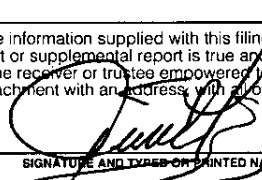
FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90013 044 ***158.75

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03162004 Chg-P CR2E034 (10/03)

DOCUMENT # P98000070466			
1. Entity Name BBS TRADING, INC.			
Principal Place of Business 4389 NW 13 ST. MIAMI, FL 33172		Mailing Address 9389 NW 13 ST. MIAMI, FL 33172	
2. Principal Place of Business 2715 W. 81 Street Suite, Apt. #, etc.		3. Mailing Address 2715 W. 81 Street Suite, Apt. #, etc.	
City & State Hialeah, Florida		City & State Hialeah, Florida	
4. FEI Number 65-0869555		Applied For Not Applicable	
Zip 33016		Country	
Zip 33016		Country	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent BETTENCOURT, CESAR 9389 NW 13 STREET MIAMI, FL 33172		7. Name and Address of New Registered Agent Name Rozenwaig & Ferrero-Carr Street Address (P.O. Box Number is Not Acceptable) 301 W. Hallandale Beach Blvd. City Hallandale Beach FL Zip Code 33009	
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 		Rosario Ferrero-Carr, Esq. 3/16/04 (NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D BETTENCOURT, CESAR AUGUSTO 9389 NW 13 STREET MIAMI, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2715 W. 81 Street Hialeah, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAVIO, ELIO 9389 NW 13 STREET MIAMI, FL 33172 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2715 W. 81 Street Hialeah, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRICENO, PAUL 9389 NW 13 ST. MIAMI, FL 33172 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D BRICENO, RAUL 2715 W. 81 Street Hialeah, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D Roberto Ameneiro 2715 W. 81 Street Hialeah, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 another like empowered.			
SIGNATURE: 		Cesar Bettencourt, Director (305) 824-1899 Date Daytime Phone #	