

FILED
Sep 17, 2004 8:00 am
Secretary of State

09-17-2004 90003 017 ***150.00

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000022486

1. Entity Name
WINDSOR FOREX TRADING CORP.



Principal Place of Business
6288 NW 92ND AVE.
PARKLAND, FL 33068

Mailing Address
6288 NW 92ND AVE.
PARKLAND, FL 33068

24085484



2. Principal Place of Business
7612 OLD THYME COURT
Suite, Apt. #, etc.

3. Mailing Address
7612 OLD THYME COURT
Suite, Apt. #, etc.

09132004 Chg-P CR2E034 (10/03)

City & State
PARKLAND FL
Zip 33076 Country USA

City & State
PARKLAND FL
Zip 33076 Country USA

4. FEI Number
65-0902076
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
ANTHONY, FRISONE
6288 NW 92ND AVE.
PARKLAND, FL 33068

7. Name and Address of New Registered Agent
Name
ANTHONY FRISONE
Street Address (P.O. Box Number is Not Acceptable)
7612 OLD THYME COURT
City PARKLAND FL Zip Code 33076

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 Anthony M. Frisone DATE 9/13/04
Signature, type or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
FRISONE, ANTHONY
6288 NW 92ND AVE.
PARKLAND, FL 33068 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
FRISONE ANTHONY
7612 OLD THYME CT
PARKLAND FL 33076 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ 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: Anthony M. Frisone DATE 9/13/04 DAYTIME PHONE # 954-553-2920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR