

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000042965

Entity Name: DON MARCOS TRADING CO.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

140 ROYAL PALM WAY, #202
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

140 ROYAL PALM WAY, #202
PALM BEACH, FL 33480

New Mailing Address:

FEI Number: 65-0921319

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METTLER, PETER W ESQ.
140 ROYAL PALM WAY, #202
PALM BEACH, FL 33480 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHANNON, EARL T
Address: 140 ROYAL PALM WAY 202
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: TD () Delete
Name: BODENWEBER, SCOTT W
Address: 1080 SE 3RD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SD () Delete
Name: WRIGHT, PETER W
Address: 1080 SE 3RD AVE
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: BODENWEBER, SCOTT W
Address: 1850 SE 17TH STREET, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: SD (X) Change () Addition
Name: WRIGHT, PETER W
Address: 1850 SE 17TH STREET, SUITE 300
City-St-Zip: FORT LAUDERDALE, FL 33316

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EARL T. SHANNON

PD

04/18/2005

Electronic Signature of Signing Officer or Director

Date