

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State

02-14-2005 90044 013 ***150.00

DOCUMENT # P99000060478 1. Entity Name PENNY TRADING CORP.			
Principal Place of Business 11900 BISCAYNE BLVD. SUITE 806 NORTH MIAMI, FL 33181 US		Mailing Address 11900 BISCAYNE BLVD. SUITE 806 NORTH MIAMI, FL 33181 US	
2. Principal Place of Business 3570 NW 89 Terrace Suite, Apt. #, etc.		3. Mailing Address 3570 NW 89 Terrace Suite, Apt. #, etc.	
City & State Cooper City, FL		City & State Cooper City, FL	
Zip 33024	Country US	Zip 33024	Country US
4. FEI Number 02-0602393		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GREENFIELD, JOHN 11900 BISCAYNE BLVD. SUITE 806 NORTH MIAMI, FL 33181		7. Name and Address of New Registered Agent Name John Greenfield Street Address (P.O. Box Number is Not Acceptable) 3570 NW 89 Terrace City Cooper City FL Zip Code 33024	
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 <u>John Greenfield</u> <u>John Greenfield</u> <u>2/14/05</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$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	VSTD GREENFIELD, JOHN 11900 BISCAYNE BLVD. SUITE 806 NORTH MIAMI, FL 33181 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD John Greenfield 3570 NW 89 Terrace Cooper City, FL 33024 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENFIELD, LOUIS 11900 BISCAYNE BLVD, STE 506 NORTH MIAMI, FL 33181 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Louis Greenfield 1944 SW 105 Ave. Davie, FL 33328 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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: <u>John Greenfield</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u>2/14/05 9572947054</u> Date Daytime Phone #	