## **2008 FOR PROFIT CORPORATION ANNUAL REPORT**

## DOCUMENT # P99000070036

1. Entity Name

FLOREX TRADING, INC.



**FILED** Jan 10, 2008 08:00 AM Secretary of State

Fee Required

Principal Place of Business

9737 NW 41ST STREET, #499 **DORAL, FL 33178** 

Mailing Address

9737 NW 41ST STREET, #499 DORAL, FL 33178



## DO NOT WRITE IN THIS SPACE

01032008	008 No Chg-P		CR2E034 (11/05)		
4. FEI Number		T	Applied For		
65-0942			Not Applicable		
5. Certificate of Status Desired		\$8.75 Additional			

6. Name and Address of Current Registered Agent

SANTOS, EDUARDO 9737 NW 41ST STREET, #499

SIGNATURE:

## DO NOT WRITE

12/18/07

DORAL, FL 33178		IN THIS SPACE			
8. The above named entry submits this statement for the the obligations of egistated agent?	purpose of changing its registere	ed office or registered agent, or both, in the State of Florida. I am familiar with, and accept			
SIGNATURE Signature, typed or printed name of schedule agent and titl	De l'applicable (NOTE Registeres	od Agent signature required when constained DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.				
10. OFFICERS AND DIRE	ECTORS	I STATE OF THE STA			
TITLE P NAME SANTOS, EDUARDO STREEI ADDRESS 9737 NW 41ST STREET, #499 CITY-ST-ZIP DORAL, FL · 33178					
NAME STRÉET ADDRESS CITY-ST-ZIP	,	000000778359 01/10/08-80045-012 158.75			
TITLE NAME STREET ADDRESS CITY-S1-ZIP		DO NOT WRITE			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME _STREET ADDRESS _ CITY-ST-ZIP	• • •				
	e and accurate and that my signal red to execute this report as requi	emptions contained in Chapter 119, Florida Statutes, I further certify that the information iture shall have the same legal effect as if made under oath, that I am an officer or director irred by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if			

OFFICER OR DIRECTOR