2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 05, 2004 8:00 am Secretary of State DOCUMENT # \$96350 1. Entity Name 04-05-2004 90071 013 ***150.00 CONSOLIDATED WORLD TRADERS, INC. Principal Place of Business Mailing Address 7300 W. CAMINO REAL SUITE #230 7300 W. CAMINO REAL SUITE #230 **BOCA RATON FL 33433 BOCA RATON FL 33433** 2. Principal Place of Business 3. Mailing Address 7843 N.W. 70TH AVENUE 7843 N.W. 70TH AVENUE Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State City & State Applied For 4. FEI Number 65-0297628 PARKLAND, FL PARKLAND, Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 33067 USA 33067 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VAN WELIE, ERIK Street Address (P.O. Box Number is Not Acceptable) 7843 N.W. 70TH AVENUE 7300 W. CAMINO REAL **SUITE #230 BOCA RATON FL 33433** Zip Code 33067 PARKLAND 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 ERIK VAN WELIE MANAGING DIRECTOR 04-01-04 **SAGNATURE** d or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2064 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ■ Addition Change | TITLE Delete TITLE WELIE, JAN VAN NAME NAME STREET ADDRESS TETELO VARGAS #37 STREET ADDRESS CITY-ST-ZIP SANTO DOMINGO, REP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition VAN WELIE, ERIK NAME NAME 7843 NW 70TH AVE STREET ADDRESS STREET ADDRESS PARKLAND FL 33067 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-Z/P CITY-ST-ZIP ☐ Change ☐ Addition TIT1 F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 chapters, with adulther like empowered.

other like empowered

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIK VAN WELIE

changed, or on an attachment w

SIGNATURE:

FILED

954)796-7370

04-01-04