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## 2002 UNIFORM BUSINESS REPORT (UBR)

## Jul 18, 2002 8:00 am Secretary of State F01000006192 DOCUMENT # 07-18-2002 90126 039 \*\*\*150.00 W.M.S. TRADE GROUP INTERNATIONAL, INC. Principal Place of Business Mailing Address 5578 SHADOW LAWN DR. 5578 SHADOW LAWN DR. SARASOTA FL 34242 SARASOTA FL 34242 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 22-3075641 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILLIAMS, DIANE J Street Address (P.O. Box Number is Not Acceptable) 5578 SHADOW LAWN DR. SARASOTA FL 34242 City Zip Code 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. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE ☐ Addition WILLIAMS, DARRELL R NAME NAME 5578 SHADOW LAWN DR. STREET ADDRESS STREET ADDRESS SARASOTA FL CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change Addition NAME WILLIAMS, DIANE J NAME 5578 SHADOW LAWN DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TIT) F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

CITY-ST-7IP

## Attachment #12196 | W.M.S. TRADE GROUP, INC.

July 15, 2002

TO: Florida Department of State Division of Corporations Uniform business Report Filings PO Box 1500 Tallahassee, FL 32302-1500

RE: W.M.S. TRADE GROUP, INC.

Document # F01000006192

FEI # 22-3075641

Last week, I received the Uniform Business Report (UBR) form. After checking my records, I found that I had sent this in February of 2002. However, I checked my account and the check has never cleared.

Meanwhile, can you please accept this payment of \$150.00 in lieu of the fact that I believed I had paid it in February of 2002? I am asking that the late fee be waived and have included a copy of the February filing along with the new one I completed today.

Thank you very much for your assistance in this matter.

Regards,

Diane J. Williams

SR. VP & COO

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6. Name and Ad	Idress of Current R	egistered Agent		7. Vame	Name and Address of N	ew Registered	Agent .	· · · · · · · · · · · · · · · · · · ·
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5578 SHADOW LAWN DR.								• •
SARASOTA FL 34242								
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SIGNATURE	Marie Co	William	~^	office or registered	<u> </u>	Ebrung	12, 0	2002
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- February 12, 2002

Diane J. Willeams

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