

# 2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F01000006192

**FILED**  
**Oct 29, 2014**  
**Secretary of State**

**Entity Name:** W.M.S. TRADE GROUP INTERNATIONAL, INC.

**Current Principal Place of Business:**

839 TALLEVAST ROAD  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

5578 SHADOW LAWN DR.  
SARASOTA, FL 34242

**New Mailing Address:**

**FEI Number:** 22-3075641

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILLIAMS, DIANE J  
5578 SHADOW LAWN DR.  
SARASOTA, FL 34242 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: DIANE J WILLIAMS

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: WILLIAMS, DARRELL R  
Address: 5578 SHADOW LAWN DR.  
City-St-Zip: SARASOTA, FL 34242

Title: SD  
Name: WILLIAMS, DIANE J  
Address: 5578 SHADOW LAWN DR.  
City-St-Zip: SARASOTA, FL 34242

Title: D  
Name: MILES, DARA A  
Address: 209 CLAPBOARD RIDGE ROAD  
City-St-Zip: GREENWICH, CT 06831

I hereby 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 all other like empowered.

SIGNATURE: DIANE J WILLIAMS

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VP

10/29/2014

\_\_\_\_\_  
Date