

# 2001 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # P00000005136**

1. Entity Name  
**COMPA TRENDS, INC.**

FILED

01 OCT -1 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business: **13960 SW 172 TERR MIAMI FL 33177**

Mailing Address: **13960 SW 172 TERR MIAMI FL 33177**

2. Principal Place of Business Suite, Apt. #, etc.

3. Mailing Address Suite/Apt. #, etc.

City & State

Zip Country

4. FEI Number: **65-0973730**

Applied For:  Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATE CREATIONS ENTERPRISES INC**  
**941 4TH STREET #200**  
**MIAMI BEACH FL 33139**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** 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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
(See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>PRUDHOMME, FEDE</b>	
STREET ADDRESS	<b>13960 SW 172 TERR</b>	
CITY-ST-ZIP	<b>MIAMI FL 33177</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>PERODIN, JAMES</b>	
STREET ADDRESS	<b>13960 SW 172 TERR</b>	
CITY-ST-ZIP	<b>MIAMI FL 33177</b>	
TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: FEDE PRUDHOMME **FEDE PRUDHOMME** 8-28-01 796 351-8688  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/01)

**COMPA TRENDS, INC.**  
P.O BOX 565331 MIAMI, FL. 33256  
TEL: (786)351-8688 E-MAIL : [fedeprudhomme@hotmail.com](mailto:fedeprudhomme@hotmail.com)  
Website: [www.compatrends.com](http://www.compatrends.com)

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To: Whom it may Concern

We did not receive a notice prior to this one. we were not even aware of this annual report. Please consider waiving the late fee for us.

Thank You

Fede Prudhomme (President)