

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 93594 030 ***150.00

DOCUMENT # P01000049475

1. Entity Name
A & C GLOBAL TRADING INC.

Principal Place of Business
14404 SW 109 ST
MIAMI FL 33186

Mailing Address
14404 SW 109 ST
MIAMI FL 33186



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OSPINA, ALFREDO
14404 SW 109 ST
MIAMI FL 33186

Name

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

City

FL

Zip Code

8. The above named entity certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature of the registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/24/02

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		DIRECTOR ALFREDO OSPINA 14404 SW 109 ST MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		DIRECTOR ALEXANDER OSPINA 14404 SW 109 ST MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		DIRECTOR WILSON OSPINA 14404 SW 109 ST MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		DIRECTOR ALFRED L. OSPINA 14404 SW 109 ST MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		DIRECTOR AIDEE J. PIEDRA 14404 SW 109 ST MIAMI FL 33186	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (9/01)

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: X

SIGNATURE REQUIRED

3/24/02

Date

Daytime Phone #

