

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 07, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90054 017 \*\*\*158.75

DOCUMENT # P98000065325

1. Entity Name

KYO TRADING CORP.

00000000



DO NOT WRITE IN THIS SPACE

|   |  |
|---|--|
| Principal Place of Business<br><del>661 W. FLAGLER ST.</del><br><del>MIAMI FL 33130</del><br>US | Mailing Address<br><del>661 W. FLAGLER ST.</del><br><del>MIAMI FL 33130-0423</del><br>US |
|---|--|

|  |  |
|--|--|
| 2. Principal Place of Business<br>5919 N.W. 110 CT.<br>Suite, Apt. #, etc. | 3. Mailing Address<br>5919 N.W. 110 CT.<br>Suite, Apt. #, etc. |
|--|--|

|                            |                       |                             |                               |
|----------------------------|-----------------------|-----------------------------|-------------------------------|
| City & State<br>MIAMI, FLA | City & State<br>MIAMI | 4. FEI Number<br>65-0852116 | Applied For<br>Not Applicable |
| Zip<br>33178               | Country<br>USA        | Zip<br>33178                | Country<br>USA                |

|  |                                |
|--|--------------------------------|
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |
|--|--------------------------------|

6. Name and Address of Current Registered Agent

~~FERNANDEZ, EDUARDO A~~  
~~2487 N.W. 187 AVENUE~~  
~~PEMBROKE PINES FL 33029~~

7. Name and Address of New Registered Agent

Name: Jose S. Villalba  
 Street Address (P.O. Box Number is Not Acceptable):  
 5919 N.W. 110 CT.  
 City: MIAMI FL Zip Code: 33178

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: *[Signature]* (Jose S. Villalba) DATE: 03/03/00

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 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         |  |
|------------------------------------|--|
| TITLE: D                           | <input checked="" type="checkbox"/> Delete |
| NAME: RESTREPO-MERCADO, JAVIER E   |  |
| STREET ADDRESS: 661 W. FLAGLER ST. |  |
| CITY-ST-ZIP: MIAMI FL 33130        |  |
| TITLE: D                           | <input checked="" type="checkbox"/> Delete |
| NAME: HOLGHIN GALONGE, ANTONIO F   |  |
| STREET ADDRESS: 661 W. FLAGLER ST. |  |
| CITY-ST-ZIP: MIAMI FL 33130        |  |
| TITLE: D                           | <input type="checkbox"/> Delete            |
| NAME: VILLALBA-BECTRAN, JOSE S     |  |
| STREET ADDRESS: 661 W. FLAGLER ST. |  |
| CITY-ST-ZIP: MIAMI FL 33130        |  |
| TITLE: D                           | <input checked="" type="checkbox"/> Delete |
| NAME: QUINTERO-ORTIZ, JORGE        |  |
| STREET ADDRESS: 661 W. FLAGLER ST. |  |
| CITY-ST-ZIP: MIAMI FL 33130        |  |
| TITLE:                             | <input type="checkbox"/> Delete            |
| NAME:                              |  |
| STREET ADDRESS:                    |  |
| CITY-ST-ZIP:                       |  |
| TITLE:                             | <input type="checkbox"/> Delete            |
| NAME:                              |  |
| STREET ADDRESS:                    |  |
| CITY-ST-ZIP:                       |  |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |  |
|---|--|
| TITLE:  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME:   |  |
| STREET ADDRESS:                                       |  |
| CITY-ST-ZIP:  |  |
| TITLE:  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME:   |  |
| STREET ADDRESS:                                       |  |
| CITY-ST-ZIP:  |  |
| TITLE: PRESIDENT.                                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME:   |  |
| STREET ADDRESS:                                       |  |
| CITY-ST-ZIP:  |  |
| TITLE:  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME:   |  |
| STREET ADDRESS:                                       |  |
| CITY-ST-ZIP:  |  |
| TITLE:  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME:   |  |
| 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: *[Signature]* (Jose S. Villalba) DATE: 03/03/00 (305) 597-0251

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 19/99