2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # V67566 1. Entity Name PROGRAM TRADING CORP.						FILED Mar 03, 2000 8:00 am Secretary of State 03-03-2000 90246 017 ***150.00				
Principal Place 111 NORTH OR 1525	ANGE AVE	Mailing Address 111 NORTH ORANGE AVE 1525							150	
ORLANDO FL 32801 US 2. Principal Place of Business		ORLANDO FL 32801-2342 US								
2. Principal Pi Suite, Apt. i		3. Mailing Address Suite, Apt. #, etc.				e illinet heenen alee	do not write i			
City & State		City & State			4.	4. FEI Number 50-3145580 Applied For				
Zip	Country ~	Zip	try	5	Certificate of Sta			Not 5 Addi equired		
	6. Name and Address of Current R	egistered Agent			7.	Name and Addr	ess of New Reg	istered Agent		
				Name						
RENNEKER, ROBERT J. 111 N. ORANGE AVENUE				Street Address (P.O. Box Number is Not Acceptable)						
#152 ORL/	5 NDO FL 32801		City		FL Zip Code					
9. This corpo Tax filing re	Signature, typed or printed name of registered agent an ration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW! After MAY 1, 20	11 FEE 00 Fee	IS \$150.0 will be \$5	50.00	10. Election	Campaign Finan			) May Be to Fees
(See criteri		Make Check Payab		epartment					OTODO	INL 13
11. TITLE NAME STREET ADDRESS CITY - ST - ZIP	OFFICERS AND D PD RENNEKER, ROBERT J. 111 N. ORANGE AVE, STE 1525 ORLANDO FL 32801	IRECTORS			Presid Robert	J Rennek Orange Av	er e. Ste 15	<b>X</b> ) C		Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ST Delete GROENEVELD, WILLIAM 18 HERSEY DRIVE OCEAN RIDGE FL 33435			E E Et address - St - Zip	Neal T 1507 L	irector Change X Ad eal Tolar 507 Litchen Rd popka FL 32712				X Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARNAS, LEV 798 NE 71ST ST BOCA RATON FL 33487	🔀 Delete			Direct Mitche 3 Stal	or 11 Reisma 1ion Dr		<b>X</b> ] CI	hange	Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GRINBERG, ROBERT 2000 ISLAND BLVD MIAMI FL 33160	Delete						C	hange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REISMAN, MITCHELL 19 OLIVER PL STATEN ISLAND NY 10314	Delete						C	hange	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete							hange	Addition
of the corp	ertify that the information supplied with t on this report or supplemental report is to soration or the receiver or trustee empoy or on an attachment with an address, wi	vered to execute this report	as requir	mption stat ture shall h red by Cha	ed in Section ave the same pter 607, Flo	n 119.07(3)(i), Flo e legal effect as if rida Statutes; and	rida Statutes. I fu made under oat that my name a	rther certify than h; that I am an ppears in Block	t the in officer of < 11 or 1	formation or director Block 12 if