

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000052148**

1. Entity Name

Alliance Trade International, Inc.

FILED
Aug 08, 2000 8:00 am
Secretary of State

06-12-2000 90041 017 ***150.00

Principal Place of Business

Mailing Address

5001 Coronado Ridge ← Incorrect Street
Boca Raton, Florida 33486 number on Articles

CORRECT ADDRESS

2. Principal Place of Business

5100 Coronado Ridge

3. Mailing Address

5100 Coronado Ridge

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Boca Raton, Florida

City & State

Boca Raton, Florida

4. FEI Number

65-0845582

Applied For

☐ Not Applicable

Zip

33486

Country

Palm Beach

Zip

33486

Country

Palm Beach

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

NA

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

Signature, typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when re-registering)

5-15-00

DATE

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 \$1,600.00

After MAY 17 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Vice President	☐ Delete
NAME	Chris Mantilla	
STREET ADDRESS	5100 Coronado Ridge	
CITY-ST-ZIP	Boca Raton, FL 33486	
TITLE	President	☐ Delete
NAME	Pamela V. Burgering	
STREET ADDRESS	5100 Coronado Ridge	
CITY-ST-ZIP	Boca Raton, FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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:

Pamela V. Burgering

5-15-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3A + Pres. As per conversation w/ Pamela Burgering 2/28/01