

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90169 013 ***150.00

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DOCUMENT # P00000010973

1. Entity Name
DE SOLA TRADING COMPANY INC.



Principal Place of Business
**5590 NW 107TH AVENUE
#1109
MIAMI FL 33178
US**

Mailing Address
**5590 NW 107TH AVENUE
#1109
MIAMI FL 33178
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3404742**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DE SOLA, GERARDO A
4630 NW 102ND AVENUE
#108
MIAMI FL 33178**

Name **DE SOLA GERARDO A.**
Street Address (P.O. Box Number is Not Acceptable)
5590 NW 107TH AVE # 1109
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

GERARDO DE SOLA

04/02/03

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **DE SOLA, GERARDO**
STREET ADDRESS **4630 NW 102ND AVENUE #108**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE **P** ☒ Change ☐ Addition
NAME **DE SOLA GERARDO**
STREET ADDRESS **5590 NW 107TH AVE # 1109**
CITY-ST-ZIP **MIAMI, FL 33178**

TITLE **VP** ☐ Delete
NAME **DE SOLA, VILMA H**
STREET ADDRESS **4360 NW 102ND AVENUE #108**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE **VP** ☒ Change ☐ Addition
NAME **DE SOLA VILMA H**
STREET ADDRESS **5590 NW 107TH AVE # 1109**
CITY-ST-ZIP **MIAMI, FL 33178**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] **GERARDO DE SOLA** **04/02/03** **305-2020925**

Date

Daytime Phone #

CR2E034 (10/02)