

DOCUMENT # 536752

1. Entity Name
MIAMI AQUARIUM TRADERS, INC.

FILED
Jan 10, 2001 8:00 am
Secretary of State

01-10-2001 90071 032 ***150.00

Principal Place of Business
2625 HUNTER COURT
FT LAUDERDALE FL 33331
US

Mailing Address
2625 HUNTER COURT
FT LAUDERDALE FL 33331
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1570 S.W. 155TH AVE.
Suite, Apt. #, etc.

3. Mailing Address
1570 S.W. 155TH AVE.
Suite, Apt. #, etc.

City & State
DAVIE, FLORIDA

City & State
DAVIE, FLORIDA

Zip
33326

Country
U.S.A.

Zip
33326

Country
U.S.A.

4. FEI Number 59-1759018 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
RAMBARRAN, HARRY
2625 HUNTER COURT
FT LAUDERDALE FL 33331

RAMBARRAN, HARRY
1570 S.W. 155TH AVE
DAVIE, FLORIDA 33326

7. Name and Address of New Registered Agent
Name
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 _____ (NOTE: Registered Agent signature required when reinstating) 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 \$150.00
After MAY 1, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	PD RAMBARRAN, HARRY 2625 HUNTER COURT FT LAUDERDALE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAMBARRAN, EDNA D. 2625 HUNTER CT. FT LAUDERDALE FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAMBARRAN, HARRY 1570 S.W. 155TH AVE. DAVIE, FLORIDA 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAMBARRAN, EDNA D. 1570 S.W. 155TH AVE DAVIE, FLORIDA, 33326 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: HARRY RAMBARRAN
Signature and Typed or Printed Name of Signing Officer or Director
Date JAN. 5TH. 2001 Daytime Phone # (954) 452-5050

CR2E034 (10/00)