

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #

628699

1. Entity Name

TRADEWINDS INTERNATIONAL INC.



FILED

03 MAR 31 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2305 PARKSIDE PL.

Suite, Apt. #, etc.

3. Mailing Address

2305 PARKSIDE PL.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

INDIAN HARBOR BCH. FL.

Zip

32937

Country

USA

City & State

INDIAN HARBOR BCH. FL.

Zip

32937

Country

USA

4. FEI Number

59-2132576

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Street Address (Number is Not Acceptable)

T. KOUJALES

2305 PARKSIDE PL.

INDIAN HARBOR BCH, FL 32937

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-13-03
DATE

January 1 - May 1 Fee is \$180.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

~~PRESIDENT~~

~~THOMAS C. KOUJALES~~

~~2305 INDIAN HARBOR BCH, FL.~~

~~32937~~

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

~~PRESIDENT~~

T. KOUJALES

2305 PARKSIDE PL.

INDIAN HARBOR BCH, FL 32937

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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CITY-ST-ZIP

400013345114

03/03/03--01085--004 **150.00

**DO NOT WRITE
IN THIS SPACE**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-03

Date

321-863-5465

Daytime Phone #

CR2E034B (12/02)