2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 660127

1. Entity Name

EDRICH TRADING, INC.

LDINOITI	TODING, INC.			\					
Principal Place of Business 13450 SW 126TH STREET 11		13450 S	Mailing Address 13450 SW 126TH STREET 11 ,			40002518			
	lace of Business	3. Mailir	3. Mailing Address			1	.	VII BÝDIE BÍDEI OL	DO: 01010 1980
Suite, Apt. #, etc.		Suite,	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State	9	City 8	City & State			4. FI	4. FEI Number 59-1983214 Applied For Not Applicable		
Zip	Country	Zip	Zip C		untry 5. Certificate o			sired \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent				
					Name				
WHITAKER, JOHN D 9370 SUNSET DR.					Street Address (P.O. Box Number is Not Acceptable)				
#A255					<u> </u>				
MIAMI FL 33173					City FL Zip Code				e
	named entity submits this statemen ions of registered agent.	t for the purpo	se of changing its	registered	office or register	red age	ent, or both, in the State of Florida. I am f	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applic	cable. (NOTE	E: Registered /	Agent signature required	t when rei	instating) 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.		May Be I to Fees	
10. OFFICERS AND D		ND DIRECTOR	DIRECTORS 1			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD Delete GOLD, RICHARD W. 8291 SW 164TH ST. MIAMI FL		TITLE NAME STREET CITY-S	ADDRESS			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Delete GOLD, MARTA 8291 SW 164TH ST. MIAMI FL		TITLE NAME STREET CITY-S	ADDRESS ST-ZIP			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	address St-zip	-		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREET CITY-S	TADORESS ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY_ST_7IP			Delete	TITLE NAME STREET CITY-S	TADDRESS ST-7IP			☐ Change	☐ Addition

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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

1/6/6

(305) 378 - 0300

FILED

Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90031 041 ***150.00

Daytime Phone #

Change

☐ Addition

:R2F034 (10/