2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (ÚBR)

## **DOCUMENT#**

F02000005152

1. Entity Name VIEWTRADE FINANCIAL NETWO	ORK, INC.
Principal Place of Business 7280 WEST PALMETTO PARK RD STE 105 BOCA RATON FL 33433	Mailing Address 7280 WEST PALMETTO PARK RD STE 105 BOCA RATON FL 33433
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	. Suite, Apt. #, etc.
City & State	City & State

Jul 11, 2003 8:00 am Secretary of State

07-11-2003 90055 008 \*\*\*550.00

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Principal Place of Business     3. Mailing Address					-			
Suite, Apt. #, etc. Suite, Apt. #, etc.				. CHECK HERE IF MAKING CHANGES				
City & Stat	te	City & State	City & State		4. FEI Number 22-363503	 31	Applied For Not Applicable	
Zip	Country	Zip .	Zip Country		5. Certificate of Status Desired	5. Certificate of Status Desired		
	6. Name and Address of	of Current Registered Agent			7. Name and Address of New Registered Agent			
				Name	<u> </u>			
ST. CLAII	r, James"					<u> </u>		
7280 WEST PALMETTO PARK RD., STE 105				Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33433								
				City		FL Z	Zip Code	
		atement for the purpose of chang	ing its registere	ed office or regis	tered agent, or both, in the State of	Florida. I am familia	ar with, and accept	
trie obliga:	tions of registered agent,	,		•				
SIGNATURE							<u> </u>	
	Signature, typed or printed name of rec	istered agent and title if applicable.	(NOTE: Registered	d Agent signature requi	ired when reinstating)	DATE	· · ·	
After Se	ILE NOW!!! FEE IS \$55 ptember 10, 2003 Fee wil k Payable to Florida Depa	l be \$750.00			9. Election Campaign Trust Fund Contribut	· -	\$5.00 May Be Added to Fees	
10.	OFFIC	ERS AND DIRECTORS	11,		ADDITIONS/CHANGES TO O	FFICERS AND DIRE	CTORS IN 11	
TITLE	CFO	☐ Delete	TITLE	T/	c/	X	Change	
NAME	ST. CLAIR, JAMES		NAME	· } <b>'</b>	/		ĺ	
STREET ADDRESS	7280 WEST PALMETTO	PARK RD., STE 105	STREE	ET ADDRESS	•			

10.	OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO ST. CLAIR, JAMES 7280 WEST PALMETTO PARK RD., STE 105 BOCA RATON FL 33433	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/C/	e 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCO ST. CLAIR, JAMES 7280 WEST PALMETTO PARK RD., STE 105 BOCA RATON FL 33433	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO DOMBROWSKI, ROBERT 525 WASHINGTON BLVD 35TH FL JERSEY CITY NJ 07310	☐ Delete	TITLE NAME ~ STREET ADDRESS CITY-ST-ZIP	Chang	e	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO HOD, ZOHAR 525 WASHINGTON BLVD 35TH FL JERSEY CITY NJ 07310	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e	
12. Thereby o	certify that the information supplied with this filing doe	se not qualify for the	a evamption stat	ed in Section 119 07/3Vi). Florida Statutos, i further contifu that the	a information	

receipt verify may me 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 receipter of the corporation or the receipter of the corporation or the receipter of the corporation of the corporation or the receipter of the corporation of the corporation of the corporation of the corporation of the receipter of the corporation o

SIGNATURE:

SIGNATURE AND TYPED OR NRINTED NAME OF SIGNING OFFICER OR DIRECTOR