

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 05, 2001 08:00 AM**
Secretary of State**DOCUMENT # F50737**1. Entity Name
INTERNATIONAL TRADE & CAPITAL, INC.Principal Place of Business
1394 S.W. EAGLEGLLEN PLACE
STUART FL 34997
Mailing Address
1394 S.W. EAGLEGLLEN PLACE
STUART FL 349972. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country
3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country4. FEI Number
59-2231199
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentCORNELL BRIAN J
1394 SW EAGLEGLLEN PLACE
STUART FL 34997 US**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 _____ **05/05/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 State10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
VD	SURINDER S. CHADHA	48 GREENHEY DRIVE, S. WOODFORD	LONDON E18 2HB. UK.	<input checked="" type="checkbox"/>
VD	HEIDACKER KAREN M	1394 S.W. EAGLEGLLEN PLACE	STUART FL 34997	<input type="checkbox"/>
PD	CORNELL, BRIAN	1394 S.W. EAGLEGLLEN PLACE	STUART FL 34997	<input type="checkbox"/>
CD	CORNELL, WILLIAM	1394 S.W. EAGLEGLLEN PLACE	STUART FL 34997	<input type="checkbox"/>
SVD	BOYDEN, CHRISTOPHER W.	1394 SW EAGLEGLLEN PLACE	STUART FL 34997	<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TVD	HEIDACKER KAREN M	1394 S.W. EAGLEGLLEN PLACE	STUART FL 34997	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Cornell CD **05/05/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)