

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000005103

1. Entity Name
PROM EX TRADING CORP.

FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90001 020 ***150.00

Principal Place of Business

13448 FORDWELL DR.
ORLANDO FL 32828

Mailing Address

13448 FORDWELL DR.
ORLANDO FL 32828-9076

2. Principal Place of Business

717 ELDORADO LANE

Suite, Apt. #, etc.

3. Mailing Address

717 ELDORADO LANE

Suite, Apt. #, etc.

City & State

DELRAY BEACH FL

Zip

33444

Country

US

City & State

DELRAY BEACH FL

Zip

33444

Country

US

4. FEI Number

59-3473202

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FERRANDO, TERRI
13448 FORDWELL DR.
ORLANDO FL 32828

Name **TERRI FERRANDO**

Street Address (P.O. Box Number is Not Acceptable)
717 ELDORADO LANE

City **DELRAY BEACH**

FL

Zip Code

33444

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 **TERRI FERRANDO**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-12-2000

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **FERRANDO, TERRI**
STREET ADDRESS **13448 FORDWELL DR.**
CITY-ST-ZIP **ORLANDO FL 32828**

TITLE **P** ☒ Change ☐ Addition
NAME **FERRANDO, TERRI**
STREET ADDRESS **717 ELDORADO LANE**
CITY-ST-ZIP **DELRAY BEACH, FL 33444**

TITLE **V** ☐ Delete
NAME **FERRANDO, JAVIER**
STREET ADDRESS **13448 FORDWELL DR.**
CITY-ST-ZIP **ORLANDO FL 32828**

TITLE **V** ☒ Change ☐ Addition
NAME **FERRANDO, JAVIER**
STREET ADDRESS **717 ELDORADO LANE**
CITY-ST-ZIP **DELRAY BEACH FL 33444**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

TERRI FERRANDO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-2000

Date

561-274-7290

Daytime Phone #

CR2E034 (9/99)