

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State

09-12-2001 90104 001 ***550.00

DOCUMENT # F99000006666

1. Entity Name

AMTRADE INTERNATIONAL BANK OF GEORGIA

LA

00063450

DO NOT WRITE IN THIS SPACE

Principal Place of Business
 One Midtown Plaza
 1360 Peachtree Street, N.E.
 Suite #1105
 Atlanta, GA 30309

Mailing Address
 One Midtown Plaza
 1360 Peachtree Street
 Suite #1105
 Atlanta, GA 30309

2. Principal Place of Business
 One Midtown Plaza, #1105
 Suite, Apt. #, etc.
 1360 Peachtree St. N.E.
 City & State
 Atlanta, GA
 Zip
 30309

3. Mailing Address
 777 Brickell Avenue
 Suite, Apt. #, etc.
 Suite #1300
 City & State
 Miami, FL
 Zip
 33131

4. FEI Number
 582025178

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 Felix J. Alvarez
 777 Brickell Avenue, Suite #1300
 Miami, Florida 33131

7. Name and Address of New Registered Agent
 Name
 Grissel C. Picot, Esq.
 Street Address (P.O. Box Number is Not Acceptable)
 777 Brickell Avenue, Suite #1300
 City
 Miami FL Zip Code
 33131

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 *Grissel C. Picot* - Grissel C. Picot, Secretary and Registered Agent **DATE** 9/5/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <input type="checkbox"/> Delete Manual V. Sicre 111 NW 136th Court Miami, FL 33182
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete Ruben L. Verdes 1506 Henoa St. Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete Felix J. Alvarez 2660 SW 37th Ave. #503 Miami, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C <input type="checkbox"/> Delete Robert Glustrom 96 Peachtree Circle Atlanta, GA 30309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input checked="" type="checkbox"/> Delete Michael Dwiggins 16519 SW 99th Street Miami, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Manuel V. Sicre 7703 SW 84 Place Miami, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Ruben L. Verdes 1506 Genoa St. Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Grissel C. Picot 3020 SW 4 Ave. Miami, FL 33129
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Robert Glustrom 96 Peachtree Circle Atlanta, GA 30309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Gail H. Wilson, Bldg. 11 Suite #810 3495 PIEDMONT RD. Atlanta, GA 30355
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Michael K. Sandberg Milland House, Milland Lipitook, Hants GU 30 7JN, UK

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: *Grissel C. Picot* - Grissel C. Picot, Secretary and Registered Agent **DATE** 9/5/01 **DAYTIME PHONE #** (305) 536-0021

CR2E034 (11/00)



Attachment

#F990000000
D0063450

Title: D
Name : JOHN P. BULLARD
Street Address: 1514 Hanover West Drive
City-ST-ZIP: Atlanta, GA 30327