

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H24838

1. Entity Name

U.S. TRADING CORPORATION, INC.

**FILED**  
**Feb 01, 2001 8:00 am**  
**Secretary of State**

02-01-2001 90127 043 \*\*\*158.75

Principal Place of Business

8044 N.W. 67 STREET  
MIAMI FL 33166

Mailing Address

8044 N.W. 67 STREET  
MIAMI FL 33166

2. Principal Place of Business

2646 N.W. 97 AVE.,

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA 33172

City & State

4. FEI Number

59-2586933

Applied For

Not Applicable

Zip

33172

Country

DADE

Zip

Country

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

SOUTHBY, JOHN E.  
12108 SW 72 TERR.  
MIAMI FL 33183

Name

CHRISTOPHER H. SOUTHBY

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

11389 S.W. 85 LANE

City

MIAMI

FL

Zip Code

33173

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

*Christopher Southby* President

1/15/01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PST** ☒ Delete  
NAME **SOUTHBY, JOHN E.**  
STREET ADDRESS **12108 SW 72 TERR.**  
CITY-ST-ZIP **MIAMI FL**

TITLE **PST** ☒ Change ☐ Addition  
NAME **SOUTHBY, CHRISTOPHER H.**  
STREET ADDRESS **11389 S.W. 85 LANE, MIAMI, FL., 33173**  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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:

*Christopher Southby*

CHRISTOPHER H. SOUTHBY 1/15/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)