

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90198 012 ***150.00

DOCUMENT # K87938

1. Entity Name

INTER-AMERICAN TRADE ASSOCIATES, INC.

Principal Place of Business

**C/O LOUIS C. ANDERSON
 111 N.E. 47TH COURT
 FT LAUDERDALE FL 33334
 US**

Mailing Address

**C/O LOUIS C. ANDERSON
 111 N.E. 47TH COURT
 FT LAUDERDALE FL 33334
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0122017

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ANDERSON, LOUIS C.
 224 COMMERCIAL BLVD.
 SUITE 317
 LAUDERDALE-BY-THE-SEA FL 33308**

7. Name and Address of New Registered Agent

Name **DOLDAN, EUSEBIO G.**

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

111 N.E. 47TH COURT

City **Font LAUDERDALE FL**

Zip Code **33334**

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

7/30/01

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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 **DP** ☐ Delete
 NAME **GONZALEZ-DOLDAN, EUSEBIO**
 STREET ADDRESS **111 NE 47TH COURT**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33334**

TITLE **D** ☐ Delete
 NAME **GONZALEZ-DOLDAN, JUDITH**
 STREET ADDRESS **111 NE 47TH COURT**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33334**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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TITLE ☐ Change ☐ Addition
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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/30/01

Date

954-491-7072

Daytime Phone #

CR2E034 (5/01)