

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000017876

1. Entity Name
FORTIS TRADING, INC.



Principal Place of Business
6538 COLLIN AVE., #204
MIAMI BEACH, FL 33141-4694

Mailing Address
6538 COLLIN AVE., #204
MIAMI BEACH, FL 33141-4694



02102004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3804657
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DRUMMOND, TERESA
6538 COLLIN AVE., #204
MIAMI BEACH, FL 33141-4694

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IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

U00000054594
02/17/04-80002-022 150.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PDC
AMARAL, LUIS A
6538 COLLIN AVE., #204
MIAMI BEACH, FL 331414694

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TSD
DRUMMOND, TERESA C
6538 COLLIN AVE., #204
MIAMI BEACH, FL 331414694

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: TERESA DRUMMOND 2/13/04 (305) 672-7552
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #