

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P00000020105**

1. Entity Name
Trade Litho, Inc.

Principal Place of Business Mailing Address
5301 NW 37th Avenue
Miami, FL 33142

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 59-1524596 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

American Information Services, Inc.
One SE 3rd Avenue, 28th Floor
Miami, FL 33131

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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, 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 \$5.00 May Be
Trust Fund Contribution. ☐ Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Director ☒ Delete
NAME Michael Carpenter
STREET ADDRESS 100 SE 3rd Ave., Suite 2108
CITY-ST-ZIP Fort Lauderdale, FL 33394

TITLE ☐ Change ☐ Addition
NAME 000004712270
STREET ADDRESS -12/07/01--01004--005
CITY-ST-ZIP *****550.00 *****550.00

TITLE Director ☒ Delete
NAME Craig Farlie
STREET ADDRESS 100 SE 3rd Ave., Suite 2108
CITY-ST-ZIP Fort Lauderdale, FL 33394

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Chmn, Pres, CFO, Sec, Dir ☐ Change ☒ Addition
NAME Ronald J. Jensen
STREET ADDRESS 5301 NW 37th Ave.,
CITY-ST-ZIP Miami, FL 33142

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Director ☐ Change ☒ Addition
NAME Pete Stein
STREET ADDRESS 5301 NW 37th Ave.
CITY-ST-ZIP Miami, FL 33142

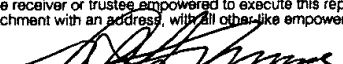
TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice President ☐ Change ☒ Addition
NAME Brian McGreevy
STREET ADDRESS 5301 NW 37th Ave.
CITY-ST-ZIP Miami, FL 33142

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Asst. Sec. ☐ Change ☒ Addition
NAME Peter J. Dunne
STREET ADDRESS 5301 NW 37th Ave.
CITY-ST-ZIP Miami, FL 33142

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:  Peter J. Dunne, Asst. Sec. 305/633-9779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 29 AM 10:30

DO NOT WRITE IN THIS SPACE

CR2E034 (11/00)