

2001 UNIFORM BUSINESS REPORT (UBR)

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

02-01-2001 90001 035 ***150.00

DOCUMENT # P00000020511

1. Entity Name

I F T INTERNATIONAL TRADING, CORP.

Principal Place of Business

Mailing Address

1375 SW 101 ST. WAY #303
 PEMBROKE PINES FL 33025

1375 SW 101 ST. WAY #303
 PEMBROKE PINES FL 33025

2. Principal Place of Business

4111 S.W. 47 AVE.

3. Mailing Address

4111 SW 47 AVE

Suite, Apt. #, etc.

301

Suite, Apt. #, etc.

301

City & State

Ft. Lauderdale, FL.

City & State

Ft. Lauderdale, FL.

4. FEI Number

65-0987-464

Applied For

Not Applicable

Zip

33314

Country

USA

Zip

33314

Country

USA.

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAMON, PABLO F
1375 SW 101 ST. WAY #303
PEMBROKE PINES FL 33025

7. Name and Address of New Registered Agent

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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** Delete
 NAME **PEREZ, ENRIQUE MONTES**
 STREET ADDRESS **12148 ST ANDREWS PL #102**
 CITY-ST-ZIP **MIRAMAR FL 33025**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** Delete
 NAME **RAMON, PABLO F**
 STREET ADDRESS **1375 SW 101 ST. WAY #303**
 CITY-ST-ZIP **PEMBROKE PINES FL 33025**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VS** Delete
 NAME **ARBOLEDA, FERNANDO**
 STREET ADDRESS **12148 ST ANDREWS PL #102**
 CITY-ST-ZIP **MIRAMAR FL 33025**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
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 STREET ADDRESS
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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: *Pablo F. Ramon*

Pablo F. Ramon

Jan. 18/2001

954-316-0737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)