

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 30, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000040378**1. Entity Name
TWO GIRLS TRADING, INC.

Principal Place of Business

415 TURNSTONE WAY

ORLANDO
32828

FL

Mailing Address

415 TURNSTONE WAY

ORLANDO
32828

FL

2. Principal Place of Business

1355 BENNETT DR

Suite, Apt. #, etc.
SUITE #177City & State
LONGWOOD
FLZip
32750

Country

3. Mailing Address

1355 BENNETT DR

Suite, Apt. #, etc.
SUITE #177City & State
LONGWOOD
FLZip
32750

Country

4. FEI Number

59-3641670

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WILSON TINA A
415 TURNSTONE WAYORLANDO FL
32828

7. Name and Address of New Registered Agent

Name

WILSON TINA A

Street Address (P.O. Box Number is Not Acceptable)
1355 BENNETT DR

SUITE 177

City
LONGWOOD

FL

Zip Code
32750

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 _____ **04/30/2001**

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

TITLE VD ☐ Delete
NAME DRWAL HEIDI A
STREET ADDRESS 415 TURNSTONE WAY
CITY-ST-ZIP ORLANDO FL 32828TITLE PD ☐ Delete
NAME WILSON TINA A
STREET ADDRESS 415 TURNSTONE WAY
CITY-ST-ZIP ORLANDO FL 32828TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VD ☒ Change ☐ Addition
NAME DRWAL HEIDI A
STREET ADDRESS 1355 BENNETT DR, SUITE #177
CITY-ST-ZIP LONGWOOD FL 32750TITLE PD ☒ Change ☐ Addition
NAME WILSON TINA A
STREET ADDRESS 1355 BENNETT DR, SUITE #177
CITY-ST-ZIP LONGWOOD FL 32750TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: TINA A. WILSON

PD

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)