

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90380 015 ***150.00

DOCUMENT # P00000041273

1. Entity Name

ONEBIN.COM, INC.



Principal Place of Business
3000 SW 60TH AVE
DAVIE FL 33314

Mailing Address
3000 SW 60TH AVE
DAVIE FL 33314

2. Principal Place of Business

3406 SW 26 Terrace

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite C-10

Suite, Apt. #, etc.

City & State

Fort Lauderdale FL

City & State

Fort Lauderdale FL

Zip

33312

Country

Broward

Zip

Fort Lauderdale FL

Country

Fort Lauderdale FL

4. FEI Number

65-1010363

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

TRUMBACH, ANDREW
3000 SW 60TH AVE
DAVIE FL 33314

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. 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, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE+ NAME
PCFO
TRUMBACH, ANDREW
STREET ADDRESS
3000 SW 60 AVE
CITY-ST-ZIP
DAVIE FL 33314 ☐ Delete

TITLE NAME
CEO
SINGH, MICHAEL
STREET ADDRESS
3000 SW 60 AVE
CITY-ST-ZIP
DAVIE FL 33314 ☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
VP- Leon Williams
STREET ADDRESS
3406 SW 26 Terrace
CITY-ST-ZIP
Fort Lauderdale FL 33312 ☐ Change ☒ Addition

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/30/03 (954) 931 6244

CR2E034 (10/02)