

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90064 035 ***150.00

DOCUMENT # P00000053907

1. Entity Name
INTERNATIONAL TRADE SERVICES OF MIAMI, INC.

Principal Place of Business

**2588 SW 27TH AVE.
 MIAMI FL 33133**

Mailing Address

**2588 SW 27TH AVE.
 MIAMI FL 33133**

2. Principal Place of Business

299 Alhambra Circle

Suite, Apt. #, etc.
Suite 203

City & State
Coral Gables, FL

Zip
33134

Country
USA

3. Mailing Address

18333 NW 7th Street

Suite, Apt. #, etc.

City & State
Pembroke Pines, FL

Zip
33029

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-1014058**

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MANTILLA, PEDRO E
 13700 SW 62ND AVENUE
 APT. 235
 MIAMI FL 33183**

7. Name and Address of New Registered Agent

Name
PEDRO E. LOPEZ
 Street Address (P.O. Box Number is Not Acceptable)
18333 NW 7th Street
 City
PEMBROKE PINES **FL** Zip Code
33029

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

Pedro E. Lopez

04/25/02

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, 2002 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
PD
 NAME
MANTILLA, PEDRO E
 STREET ADDRESS
13700 SW 62ND AVE. APT 235
 CITY-ST-ZIP
MIAMI FL 33183 ☐ Delete

TITLE
SD
 NAME
REVOLLO, MARIA E
 STREET ADDRESS
13700 SW 62ND AVE. APT 235
 CITY-ST-ZIP
MIAMI FL 33183 ☐ 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PD
 NAME
Lopez, Pedro E.
 STREET ADDRESS
18333 NW 7th St.
 CITY-ST-ZIP
PEMBROKE PINES, FL 33029 ☒ Change ☐ Addition

TITLE
SD
 NAME
ROJAS, MARIA Esther
 STREET ADDRESS
18333 NW 7th St.
 CITY-ST-ZIP
PEMBROKE PINES, FL 33029 ☒ 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

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

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:

Pedro E. Lopez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/02 (954) 322 5458

Date Daytime Phone #

CR2E034 (9/01)