

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 91006 008 ***150.00

DOCUMENT # P00000056426

1. Entity Name

YELLOW IRON TRADERS INC.

Principal Place of Business

**9035 17 PLACE
VERO BEACH FL 32966**

Mailing Address

**9302 125 AVE
FELLSMERE FL 32948**

2. Principal Place of Business

9302-125 Ave

3. Mailing Address

Suite, Apt. #, etc.

City & State

Fellsmere, FL

City & State

4. FEI Number

59-3652343

Applied For

Not Applicable

Zip

Country

32948

USA

Zip

Country

USA

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

**VOORHEES, ART
9035 17 PLACE
VERO BEACH FL 32966**

Name

Voorhees, Art

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

City

**2343 3rd St. S.W.
Vero Beach, FL, FL**

Zip Code

32962

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **VOODHEES, ART**
CITY-ST-ZIP **9035 17 PLACE
VERO BEACH FL 32966**

TITLE ☒ Change ☐ Addition
NAME **D P**
STREET ADDRESS **Voorhees, Art**
CITY-ST-ZIP **2343-3 St. S.W.
Vero Beach, FL 32962**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **SMITH, JERALD E**
CITY-ST-ZIP **9302 125 AVE
FELLSMERE FL 32948**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **SMITH, LAURA S**
CITY-ST-ZIP **9302 125 AVE
FELLSMERE FL 32948**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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CITY-ST-ZIP

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:

Laura Schuler Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/01
(Date)

561571-0438
Daytime Phone #

CR2E034 (10/00)