

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000058494

1. Entity Name

TRADEGROUP, INC.

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90072 014 ***150.00

0152912

Principal Place of Business
1200 BRICKELL AVENUE SUITE 950
MIAMI FL 33131

Mailing Address
1200 BRICKELL AVENUE SUITE 950
MIAMI FL 33131

110437



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1023 SW 25th Avenue
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Miami, FL
Zip
33135
Country
U.S.A.

4. FEI Number
65-1031238
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
KAUFMAN, CHERYL JULIEN
2301 SUNSET DRIVE
MIAMI BEACH FL 33140

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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete D SANTOS-BUCH, KEVIN 1200 BRICKELL AVENUE SUITE 950 MIAMI FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: X Santos Buch
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X JAN 27, 2001 X 305 695 0290
Date Daytime Phone #

CR2E034 (10/00)