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**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000072649

1. Entity Name

ACT TRADING CORPORATION

FILED

02 DEC 18 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1129 ROYAL PALM BEACH

3. Mailing Address

1129 ROYAL PALM BEACH

Suite, Apt. #, etc.

041

Suite, Apt. #, etc.

041

DO NOT WRITE IN THIS SPACE

City & State

ROYAL PALM BEACH

City & State

ROYAL PALM BEACH

4. FEI Number

651028153

Applied For

Not Applicable

Zip

33411

Country

PALM BEACH

Zip

33411

Country

PALM BEACH

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

TORRES, ANA C

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

1129 ROYAL PALM BEACH SUITE 041

City

ROYAL PALM BEACH

FL

Zip Code

33411

**DO NOT WRITE
IN THIS SPACE**

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
TORRES ANA C
PRESIDENT
1129 ROYAL PALM BEACH #041
ROYAL PALM BEACH, 33411

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
300009528683
12/16/02--01085--009 **150.00

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034B (12/01)



ACT Trading Corp.

1129 R. P. B. Blvd. Ste 041
Royal Palm Beach, Fl. 33411
Ph; (561) 308-0835 / Fax; (734) 902-5944
e-mail; acttrading@yahoo.com

West Palm Beach, Dec 11 2002

UNIFORM BUSINESS REPORT (UBR)
DIVISION OF CORPORATIONS
P O BOX 1500
TALLAHASSEE FL, 32302-1500

Ref: ACT TRADING CORP.
NUMBER: P00000072649

Dear Sir:

ATTACH IS OUR <UBR> AND OUR PAYMENT IN THE AMOUNT OF \$150.00
TO COVER THE APROPIATE FEE TO ACTIVATE OUR CORP.
THE PREVIOUS <UBR> WAS NEVER RECEIVED.

VTY


ANA C TORRES
PRESIDENT
ACT TRADING CORP.