

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED

04 DEC 27 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000084964

1. Entity Name  
FM TRADING GROUP, CORP.



Principal Place of Business

9656 NW 7 CIRCLE  
#1811  
PLANTATION, FL 33324

Mailing Address

9656 NW 7 CIRCLE  
#1811  
PLANTATION, FL 33324

2. Principal Place of Business

305 N.E. 16 St.

Suite, Apt. #, etc.  
B 8

City & State

Fort Lauderdale, FL

Zip

33304

Country

U.S.

3. Mailing Address

305 N.E. 16 St.

Suite, Apt. #, etc.  
B 8

City & State

Fort Lauderdale

Zip

33304

Country

U.S.



REINSTATEMENT 2004

4. FEI Number  
65-1040173

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GBS CONSULTANTS  
1290 WESTON ROAD  
SUITE 306  
FORT LAUDERDALE, FL 33326

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

12/6/2007

FILE NOW!!! FEE IS \$150.00

After January 1, 2005, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PT  
NAME PARDON, MAURICIO  
STREET ADDRESS 751 N PINE ISLAND RD, #106  
CITY-ST-ZIP PLANTATION, FL 33324

☐ Delete

TITLE VPD  
NAME HURTADO, FRANCISCO J  
STREET ADDRESS 751 N PINE ISLAND RD, #106  
CITY-ST-ZIP PLANTATION, FL 33324

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PT  
NAME Pardon, Mauricio  
STREET ADDRESS 305 N.E. 16 St. # B8  
CITY-ST-ZIP Fort Lauderdale FL 33304

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:

Mauricio Pardo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/6/07

Date

Daytime Phone #