

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90264 046 ***550.00

DOCUMENT # P00000093826

1. Entity Name

BTA INTERNATIONAL TRADING CO., INC.

Principal Place of Business

**2109 KANE PARK WAY
WINDERMERE FL 34786**

Mailing Address

**2109 KANE PARK WAY
WINDERMERE FL 34786**

2. Principal Place of Business

1385 MORNINGSIDE DR

3. Mailing Address

1385 MORNINGSIDE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MOUNT DORA, FLORIDA

City & State

MOUNT DORA, FLORIDA

Zip

32757

Country

LAKE

Zip

32757

Country

LAKE

4. FEI Number

59-3679947

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**SUDLOW, WILLIAM C
2109 KANE PARK WAY
WINDERMERE FL 34786**

7. Name and Address of New Registered Agent

Name
SUDLOW, WILLIAM C

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

1385 MORNINGSIDE DR.

City

MOUNT DORA

FL

Zip Code

32757

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]*

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
NAME **D**
STREET ADDRESS **SUDLOW, WILLIAM C**
CITY-ST-ZIP **2109 KANE PARK WAY
WINDERMERE FL 34786**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D**
STREET ADDRESS **SUDLOW, WILLIAM C**
CITY-ST-ZIP **1385 MORNINGSIDE DR.
MOUNT DORA, FL 32757**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: *[Signature]* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

27 AUGUST 2001 407/491-1186

Date

Daytime Phone #

CR2E034 (5/01)