

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000095859

1. Entity Name
KALIOPE TRADING INC

Principal Place of Business
600 PALM AVE. STE. C
HIALEAH FL 33010

Mailing Address
600 PALM AVE. STE. C
HIALEAH FL 33010

2. Principal Place of Business

3. Mailing Address
3116 COCONUT GROVE DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
CORAL GABLES FL

Zip

Country

Zip
FL 33134

Country
USA

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DE LA PAZ, FRANK
600 PALM AVE, STE C
HIALEAH FL 33010

7. Name and Address of New Registered Agent
Name: EDWARD A. HILLER
Street Address (P.O. Box Number is Not Acceptable)

3116 COCONUT GROVE DR
City: CORAL GABLES FL FL Zip Code: 33134

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

Edward A. Hiller

Signature, typed or printed name of registered agent and agent applicable.

(NOTE: Registered Agent signature required when reappointing)

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, 2002 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

OFFICERS AND DIRECTORS

TITLE	D	NAME	HILLER, EDWARD A	☐ Delete
STREET ADDRESS	600 PALM AVE, STE. C			
CITY-ST-ZIP	HIALEAH FL 33010			
TITLE	D	NAME	CHACIN, AMELIA C	☒ Delete
STREET ADDRESS	600 PALM AVE, STE. C			
CITY-ST-ZIP	HIALEAH FL 33010			
TITLE	D	NAME	DE LA PAZ, FRANK	☒ Delete
STREET ADDRESS	600 PALM AVE, STE. C			
CITY-ST-ZIP	HIALEAH FL 33010			
TITLE	CFO	NAME	Guillermo J. Arguello	☐ Delete
STREET ADDRESS	921 Tanager Street			
CITY-ST-ZIP	Coral Gables 33134			
TITLE		NAME		☐ Delete
STREET ADDRESS				
CITY-ST-ZIP				
TITLE		NAME		☐ Delete
STREET ADDRESS				
CITY-ST-ZIP				

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '11	
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	

CR2004 (9/01)

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:

EDWARD A. HILLER
EDWARD A. HILLER

Director

3/16/02

567-0419

Date

Daytime Phone #

FILED

P00000095859

02 NOV -5 AM 11:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

90090



DO NOT WRITE IN THIS SPACE

65-1056161

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3/16/02