

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000097333

1. Entity Name

~~LATIN TRUCKS, INC.~~

TRADING 2 DAY INC.

FILED

Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90101 038 ***158.75

Principal Place of Business

520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131

Mailing Address

520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131

2. Principal Place of Business

338 MAJORCA AVE

3. Mailing Address

338 MAJORCA AVE

Suite, Apt. #, etc.

SUITE 4

Suite, Apt. #, etc.

SUITE 4

City & State

CORAL GABLES, FLORIDA

City & State

CORAL GABLES, FLORIDA

Zip

33134

Country

USA

Zip

33134

Country

USA

4. FEI Number

65-1052400

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TRANSGLOBAL CORPORATE ADMINISTRATION, INC.
520 BRICKELL KEY DRIVE
SUITE 0-305
MIAMI FL 33131

Name

ESTER VILATOBA

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

338 MAJORCA AVE, SUITE 4

City

CORAL GABLES

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

APRIL 10, 2001

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **VILATOBA, ESTER**
STREET ADDRESS **520 BRICKELL KEY DRIVE SUITE 0-305**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE **D** ☒ Change ☐ Addition
NAME **VILATOBA, ESTER**
STREET ADDRESS **338 MAJORCA AVE, SUITE 4**
CITY-ST-ZIP **CORAL GABLES, FL 33134**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ESTER VILATOBA

APRIL 10, 2001

Date

(305)3451404

Daytime Phone #

CR2E034 (10/00)