

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000106514

1. Entity Name  
SAHARA TRADING CO.

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90017 027 \*\*\*150.00

Principal Place of Business

2114 BANQUET COURT  
UNIT 108  
ORLANDO FL 32807

Mailing Address

2114 BANQUET COURT  
UNIT 108  
ORLANDO FL 32807

*misspelling only*

2. Principal Place of Business

2114 Bouquet Ct.  
Suite, Apt. #, etc.  
108

3. Mailing Address

P.O. Box 2712  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
Orlando, FL

City & State  
Winter Park, FL

4. FEI Number

59 3684807

Applied For

Not Applicable

Zip  
32807

Country  
Orange

Zip  
32790

Country  
Orange

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Jeffrey P. Seyler

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

2114 Bouquet Ct. # 108

City

Orlando

FL

Zip Code

32807

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.

Jeffrey P. Seyler

29 Apr 01

(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 \$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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
SEYLER, JEFFREY P  
2114 BANQUET COURT  
ORLANDO FL 32807

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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☐ Change ☐ Addition

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey P. Seyler

Date

Daytime Phone #

29 Apr 01 407.645.3933

CR2E034 (10/00)