2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 14, 2001 8:00 am Secretary of State DOCUMENT # P00000112993 1. Entity Name TRADERS & SERVICES INTERNATIONAL, INC. 03-14-2001 90500 021 ***150.00 Principal Place of Business Mailing Address 785 CRANDON BLVD #304 785 CRANDON BLVD #304 KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149 C0033580 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State Applied For City & State 65-1060541 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ZIMBRON, GERRARDO J Street Address (P.O. Box Number is Not Acceptable) 785 CRANDON BLVD #304 KEY BISCAYNE FL 33149 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 \cdot Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change ☐ Addition TITI F TITLE DP ☐ Delete ZIMBRON, GERARDO J NAME NAME STREET ADDRESS STREET ADDRESS 785 CRANDON BLVD #304 CITY-ST-ZIP CiTY-ST-ZIP **KEY BISCAYNE FL 33149** Change ☐ Addition ☐ Delete TITLE NAME NAME ZIMBRON, JULIO B STREET ADDRESS STREET ADDRESS RUBEN DARIO #36 CITY-ST-ZIP CITY-ST-ZIP MEXICO, D.F._11560_MEXICO Change ☐ Addition ☐ Defete TITLE TITLE NAME VANEGAS, ADOLFO STREET ADDRESS STREET ADDRESS RUBEN DARIO:#36~~~ CITY-ST-ZIP CITY-ST-ZIP MEXICO, D.F. 11560 MEXICO Change ■ Addition TITLE ☐ Delete TITLE NAME NAME LENERO, AGUSTIN STREET ADDRESS STREET ADDRESS **RUBEN DARIO #36** CITY-ST-ZIP CITY-ST-ZIP MEXICO, D.F. 11560 MEXICO TITLE ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME ZIMBRON, JORGE B STREET ADDRESS STREET ADDRESS **RUBEN DARIO #36** CITY-ST-ZIP CITY-ST-ZIP MEXICO, D.F. 11560 MEXICO Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AGENT

205-283-1964

Daytime Phone #