


2003 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 15, 2003 8:00 am
Secretary of State

04-15-2003 90095 050 ***158.75

DOCUMENT # P 01000019606	
1. Entity Name EXTRADER CORPORATION	

DO NOT WRITE IN THIS SPACE

90087151

2. Principal Place of Business 9999 NE 2 AVE.	3. Mailing Address 9999 NE 2 AVE.
Suite, Apt. #, etc. SUITE 213	Suite, Apt. #, etc. SUITE 213
City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA
Zip 33138	Country DADE

DO NOT WRITE IN THIS SPACE

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4. FEI Number 65-1093118	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

7. Name and Address of Current Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

VICE PRESIDENT ETTORE, CORA

04/10/2003

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VICE PRESIDENT BRIZ, CARLOS 9999 NE 2 AVE. MIAMI, FL. 33138	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PRESIDENT - CORA, ETTORE 9999 NE 2 AVE. MIAMI, FL. 33138	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

VICE PRESIDENT

E. CORA

04/10/2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)