2002 UNIFORM BUSINESS REPORT (UBR)

Jul 25, 2002 8:00 am **DOCUMENT#** P01000043429 Secrétary of State 1. Entity Name 07-25-2002 90121 014 ***550.00 ONE MARKET TRADE, INC. Principal Place of Business Mailing Address 1820 NORTH CORPORATE LAKES BLVD 1820 NORTH CORPORATE LAKES BLVD SUITE 205 SUITE 205 WESTON FL 33326 WESTON FL 33326 2. Principal Place of Business 3. Mailing Address 300 S. Pine Island Road 300 S. Pine Island Road Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite 205 Suite 205 City & State City & State 4. FEI Number Plantation Plantation Applied For <u>65-1103218</u> Not Applicable Country 5. Certificate of Status Desired \$8.75 Additional <u> 33324</u> 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent DODDO, DAVID J David J. Doddo Street Address (P.O. Box Number is Not Acceptable) 19330 SW 31ST COURT MIRAMAR FL 33029 Suite 205 Plantation Zip Code 33324 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 7.20-02 Signature, typed or printed ame of registered agent and title if applicable: 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 10. Election Campaign Financing (See criteria on back) \$5.00 May Be Make Check Payable to Department of State Trust Fund Contribution. П Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE President Delete (4/02)NAME Enrique R. Vila Addition NAME STREET ADDRESS 200 S. Pine Island Road, Suite 205 STREET ADDRESS CITY-ST-7IP Plantation, FL 33324 CiTY-ST-ZIP Vice- President / Secretary TITLE ☐ Delete TITLE NAME David 1, Doddo ☐ Change Addition NAME STREET ADDRESS 300 S. Pine Island Road Ste 205 STREET ADDRESS CITY-ST-ZIP Plantation, FC 33324 CITY-ST-ZIP Director Envigue R. Vila TIT! F NAME ☐ Change ☐ Addition NAME 700 S. Pine Island Road, Suite 205 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Plantation, FL 33324 CITY-ST-ZIP TITLE Director Delete TITLE NAME David 1, Dodde ☐ Change ☐ Addition NAME STREET ADDRESS 200 S. Pine Island Road, Suite 205 STREET ADDRESS CITY-ST-7IF Plantation, FL 33324 CITY-ST-7IP TITLE ☐ Delete NAME □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP TITI F ☐ Delete NAME ☐ 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

7-20-02

954-424-7349

FILED