

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

DOCUMENT # P01000071566

1. Entity Name
OPEN TRADE INTERNATIONAL CORP.



90123125

Principal Place of Business

169 E FLAGLER ST.
SUITE 1534
MIAMI, FL 33131

Mailing Address

169 E FLAGLER ST.
SUITE 1534
MIAMI, FL 33131

2. Principal Place of Business

3. Mailing Address



Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

65-1132623

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NICENBOIM, JOSE E
169 E FLAGLER ST.
SUITE 1534
MIAMI, FL 33131

7. Name and Address of New 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, typewritten printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!! FEE IS \$150.00
After May 1, 2003 Fee will be \$200.00
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	PD	☐ Delete
NAME	DAVISON, ERNESTO F	
STREET ADDRESS	169 E FLAGLER ST. SUITE 1534	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	VD	☐ Delete
NAME	DAVISON, MAXIMILIANO A	
STREET ADDRESS	169 E FLAGLER ST. SUITE 1534	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	SD	☐ Delete
NAME	DAI PRA, GLADIS	
STREET ADDRESS	169 E FLAGLER ST. SUITE 1534	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	TD	☐ Delete
NAME	DAVISON, VANESA L	
STREET ADDRESS	169 E FLAGLER ST. SUITE 1534	
CITY-ST-ZIP	MIAMI, FL 33131	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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 Block 11 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

April 23, 2003

Date

Daytime Phone #

CR2E034 (10/02)