

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

DOCUMENT # **PO1000077789**

1. Entity Name

**Y. L. TRADING, Inc**  
**16275 SW 88 St # 205 Miami, FL 33196**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**16275 SW 88 St # 205**  
Suite, Apt. #, etc.  
**# 205**

3. Mailing Address

**16275 SW 88 St**  
Suite, Apt. #, etc.  
**# 205**

City & State

**Miami, Florida**

City & State

**Miami, Florida**

4. FEI Number

**65-1128054**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name **Yamile R. Leiva**

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

**16275 SW 88 St # 205**

City **Miami**

**FL**

Zip Code  
**33196**

**DO NOT WRITE  
IN THIS SPACE**

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)

**11/27/02**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

**January 1 - May 1, Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
**D: Yamile R. Leiva**  
**16275 SW 88 St # 205**  
**Miami, Florida, 33196.**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**D: Maritza Castellanos**  
**16275 SW 88 St # 205**  
**Miami, Florida, 33196**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED

02 DEC -5 PM 12:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**200009371182**  
12/05/02--01037--019 \*\*150.00

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

Y.L Trading, Inc.  
16275 SW 88 Street Apt 205  
Miami, FL 33196

December 2, 2002

Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

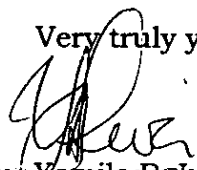
**EIN: 65-1128054**  
**DOC NO: P01000077789**

To Whom It May Concern:

This letter is to certify that I did not receive the 2002 UBR due to a change of address. I phoned the office and was told to send in the UBR with a check for \$150.00 to cover the filing.

Kindly update your records and thank you in advance for your cooperation.

Very truly yours,



Yamile R. Leiva  
President