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## 20C2 Uniform Business Report (UBR)

SIGNATURE:

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## Apr 01, 2002 8:00 am Secretary of State **DOCUMENT #** P01000085615 1. Entity Name 04-01-2002 90611 032 \*\*\*158 75 AMERICAN GLOBAL TRADING, INC. Mailing Address Principal Place of Business 8100 BYRON AVE #498x # 509 8100 BYRON AVE X 489X # 509 MIAMI BEACH FL 33141 MIAMI BEACH FL 33141 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE **SUITE # 509** SUITE # 509 Applied For City & State City & State 4. FEI Number 65-1134538 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARTIN, RAUL A Street Address (P.O. Box Number is Not Acceptable) 8100 BYRON AVE #689 4 1 509 MIAMI BEACH FL 33141 Zip Code ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submi a. WARTIN. 2-21-02. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PTD ☐ Change ☐ Addition ☐ Delete TITLE NAME PEREIRA-MARTIN, JORGE A NAME STREET ADDRESS 8100 BYRON AVE MADE STREET ADDRESS MIAMI BEACH FL 33141 CITY-ST-ZIP CITY-ST-ZIP ۷D ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME MIRANDA-DIAZ, SERVANDO STREET ADDRESS STREET ADDRESS 8100 BYRON AVE #499 # 509 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33141 TITLE SD Change Change ☐ Addition TITLE Delete NAME PEREZ-GALBAN, JORGE A NAME $odalys_{-}$ CHAVEZ 8100 BYRON AVE # 509 STREET ADDRESS STREET ADDRESS 8100 BYRON AVE-#409 MIAMI BEACH, CITY-ST-ZIP CITY-ST-ZIP FLA. 33141 MIAMI-BEACH-FL-33141 Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Detete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if