

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90254 014 ***150.00

DOCUMENT # P01000089131

1. Entity Name
SOUTH TRADING & GRANITES, INC



100

Principal Place of Business
14707 S DIXIE HWY SUITE 308
MIAMI FL 33176

Mailing Address
14707 S DIXIE HWY SUITE 308
MIAMI FL 33176



2. Principal Place of Business
14707 S. Dixie Hwy
Suite, Apt. #, etc. Suite 316
City & State Miami, FL
Zip 33176 Country USA

3. Mailing Address
14707 S. Dixie Hwy
Suite, Apt. #, etc. Suite 316
City & State Miami, FL
Zip 33176 Country USA

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
QUINTANA, CARLOS E.
14707 S DIXIE HWY SUITE 308
MIAMI FL 33176

7. Name and Address of New Registered Agent
Name QUINTANA, CARLOS E.
Street Address (P.O. Box Number is Not Acceptable) 14707 S. Dixie Hwy Suite # 316
City MIAMI FL Zip Code 33176

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 Carlos E Quintana DATE 04-21-03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	PD QUINTANA, CARLOS 9125 SW 77TH AVE APT 607A MIAMI FL 33156	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Carlos E Quintana **04-21-03** **786-293-9333**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)