

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 19, 2002 8:00 am**  
**Secretary of State**  
 05-19-2002 90185 004 \*\*\*150.00

**DOCUMENT # P01000111512**

1. Entity Name

**GLOBAL TRADING & CONSULTING, CORP.**

Principal Place of Business

**P. O. BOX 770985  
 CORAL SPRINGS FL 33077-0985**

Mailing Address

**P. O. BOX 770985  
 CORAL SPRINGS FL 33077-0985**

2. Principal Place of Business

**P.O. Box 770985**

3. Mailing Address

**P.O. Box 770985**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**CORAL SPRINGS**

City & State

**CORAL SPRINGS**

Zip

**FL 33077**

Country

Zip

**FL 33077**

Country

4. FEI Number

**65-1155234**

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THE LEGAL FRONTIER, CORP.  
 600 N. PINE ISLAND RD., SUITE 450  
 PLANTATION FL 33324**

7. Name and Address of New Registered Agent

**THE LEGAL FRONTIER, CORP**  
 Street Address (P.O. Box Number is Not Acceptable)  
**600 N. PINE ISLAND RD, SUITE 450**  
 City **PLANTATION** FL **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.

SIGNATURE

Required when reinstating)

DATE

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

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 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 **D** ☐ Delete  
 NAME **GERSHONOV, OLEG**  
 STREET ADDRESS **P. O. BOX 770985**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33077-0985**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **B** ☐ Change ☐ Addition  
 NAME **OLEG GERSONOV**  
 STREET ADDRESS **P.O. BOX 770985**  
 CITY-ST-ZIP **CORAL SPRINGS FL 33077-0985**

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

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 Block 12 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

**APR 26. 2002**

Date

Daytime Phone #

**(305) 930-1581**

CR2E034 (9/01)