

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2003 8:00 am
Secretary of State

05-28-2003 90116 022 ***150.00

DOCUMENT # P01000112579

1. Entity Name
K & BROS. TRADING AND DEVELOPMENT GROUP, INC.



Principal Place of Business
**13800 SW 8TH ST STE 214
MIAMI FL 33184**

Mailing Address
**13800 SW 8TH ST STE 214
MIAMI FL 33184**



2. Principal Place of Business
12330 NW 7th Trail

3. Mailing Address
12330 NW 7th Trail

Suite, Apt. #, etc.
Miami, FL

Suite, Apt. #, etc.
Miami, FL 33182

City & State
Miami, FL

City & State
Miami, FL

Zip
33182

Country
USA

Zip
33182

Country
USA

4. FEI Number
043671536 **APPLIED FOR**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**GHEITH, KHADER
13800 SW 8TH ST STE 214
MIAMI FL 33184**

7. Name and Address of New Registered Agent

Name **Gheith, Khader**

Street Address (P.O. Box Number is Not Acceptable)
12330 NW 7 Trail

City **Miami**

FL

Zip Code
33182

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 **K. GHEITH, President**

(NOTE: Registered Agent signature required when reinstating)

5/1/03
DATE

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 **PD** ☐ Delete
NAME **GHEITH, KHADER**
STREET ADDRESS **13800 SW 8TH ST STE 214**
CITY-ST-ZIP **MIAMI FL 33184**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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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
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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: **KHADER UFGHEITH**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/03
Date

786-556-6349
Daytime Phone #

CR2E034 (10/02)