2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State
04-10-2003 90072 032 *****8.75
04-30-2003 90167 022 ***150.00

DOCUMENT # P02000039888

1. Entity Name
IMAGE & TRADE CORP.

Principal Place of Business	Mailing Address
1328 C JEFFERSON AVE ORANGE PARK FL 32065	1328 C JEFFERSON AVE ORANGE PARK FL 32065

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
12701 50TH. ST B-21	12701 50TH. ST B-21
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TAMPA FL	City & State: TAMPA FL
Zip: 33617 Country: HILLSBOROUGH	Zip: 33617 Country: HILLSBOROUGH

4. FEI Number: 010667690 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BERNAL, FABIO
1328 C JEFFERSON AVE
ORANGE PARK FL 32065

7. Name and Address of New Registered Agent

Name: JORGE ESCALLON
Street Address (P.O. Box Number is Not Acceptable): 12701 50TH ST. B-21
City: TAMPA, FL Zip Code: 33617

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: [signature] JORGE ESCALLON PD 3/14/03
(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BERNAL, FABIO 1328 C JEFFERSON AVE ORANGE PARK FL 32065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VM GERMAN ESCALLON 4200 E. FLETCHER AV #1234 TAMPA FL 33613	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RAMIREZ, MARIA A 1328 C JEFFERSON AVE ORANGE PARK FL 32065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VM AURA BERNAL 12701 50TH. ST. B-21 TAMPA FL 33617	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD JORGE ESCALLON 12701 50TH. ST. B-21 TAMPA FL 33617	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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: SIGNATURE REQUIRED FABIO BERNAL 3/14/03 813-7879189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #