

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 28, 2008 8:00 am**  
**Secretary of State**

07-28-2008 90034 018 \*\*\*550.00

**DOCUMENT # P07000035228**

1. Entity Name  
**FIRST TRADE, INC.**



Principal Place of Business  
**2231 NE 192 ST  
N MIAMI BEACH, FL 33180**

Mailing Address  
**2231 NE 192 ST  
N MIAMI BEACH, FL 33180**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



07222008

Chg-P

CR2E034 (12/06)

4. FEI Number

**20-8824631**

Applied For

Not Applicab

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HUTNICK, KENNETH P  
300 DIPLOMAT PKWY  
# 808  
HALLANDALE BEACH, FL 33009**

7. Name and Address of New Registered Agent

Name **ALICE GOUBERT**

Street Address (P.O. Box Number is Not Acceptable)  
**2231 NE 192 street**

City **North Miami Beach** **FL** Zip **33180**

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 **ALICE GOUBERT**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**Amagwest** **07/22/08**

**FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008**

9. Election Campaign Financing  
Trust Fund Contribution.

☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **PERINOVIC, FREDERIC**  
STREET ADDRESS **2231 NE 192 ST**  
CITY-ST-ZIP **N MIAMI BEACH, FL 33180**

TITLE **VP** ☒ Delete  
NAME **LEBON, PHILIPPE**  
STREET ADDRESS **2231 NE 192 ST**  
CITY-ST-ZIP **N MIAMI BEACH, FL 33180**

TITLE **T** ☐ Delete  
NAME **SPRIET, MATHIEU**  
STREET ADDRESS **2231 NE 192 ST**  
CITY-ST-ZIP **N MIAMI BEACH, FL 33180**

TITLE **S** ☒ Delete  
NAME **NIEDT, DAVID**  
STREET ADDRESS **2231 NE 192 ST**  
CITY-ST-ZIP **N MIAMI BEACH, FL 33180**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Additi  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **VP** ☐ Change ☐ Additi  
NAME **SPRIET, mathieu**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Additi  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **S** ☐ Change ☐ Additi  
NAME **PERINOVIC, Frederic**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Additi  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Additi  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.