

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000028588

1. Entity Name

INTERTRADING & SERVICES CORPORATION

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90094 004 ***150.00

Principal Place of Business

10018 NORTH SPRING WAY
CORAL SPRINGS FL 33076
US

Mailing Address

7409 SW 13TH ST
NORTH LAUDERDALE FL 33068-3612
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0419389

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent 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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	D LE, LONG	<input type="checkbox"/> Delete
STREET ADDRESS	4967 N UNIVERSITY DR SUITE 22B	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE NAME	PCEO LE, NINH	<input type="checkbox"/> Delete
STREET ADDRESS	4967 N UNIVERSITY DR SUITE 22B	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE NAME	VP DZUNG, JOHN	<input type="checkbox"/> Delete
STREET ADDRESS	4967 N UNIVERSITY BLVD SUITE 22B	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE NAME	T DZUNG, DANIELLE	<input type="checkbox"/> Delete
STREET ADDRESS	4967 N UNIVERSITY DR SUITE 22B	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE NAME	S NGOC-PHUONG LE TRAN	<input type="checkbox"/> Delete
STREET ADDRESS	4967 N UNIVERSITY DR SUITE 22B	
CITY-ST-ZIP	LAUDERHILL FL	
TITLE NAME	VP STEELE, WAYNE R	<input type="checkbox"/> Delete
STREET ADDRESS	10018 NORTH SPRING WAY	
CITY-ST-ZIP	CORAL SPRINGS FL 33076	

TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	10018 North Springs Way
CITY-ST-ZIP	Coral Springs FL 33076
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	7409 S.W. 13th ST
CITY-ST-ZIP	North Lauderdale FL 33068
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	11500 NW 49th CT
CITY-ST-ZIP	Coral Springs FL 33076
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	11500 NW 49th CT
CITY-ST-ZIP	Coral Springs FL 33076
TITLE NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	7409 S.W. 13th ST
CITY-ST-ZIP	North Lauderdale FL 33068
TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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

Date

Daytime Phone #

CR2E034 (9/99)