2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

					 -						
DOCUI	MENT_#_P930000	75819					444-175 P 4 =				
BOTSKOR TRADE INCORPORATED											
Principal Place of Business Mailing Address						00 FEB 28 PM 1: 27					
		2340 PERIWINKLE WAY				CEMPETABLE OF CTAFE					
2340 PERIWINKLE WAY SUITE J-3		SUITE J-3				SECRETARY OF STATE TALLAHASSEE, FLORIDA					
SANIBEL ISLAN	ID FL 33957	SANIBEL ISLAND FL 33957-	3220			i restille i ile i		IEC 34 001 1 941 1	61151 161 0 1 11 2	(10 101) 1051	
2. Principal Place of Business 2340 Periwinkle Way		³ 2 Mailing Address 2340 Periwinkle Way									
Suite, Apt. #, etc. Suite I—2		Suite, Apt. #, etc. Suite I-2					DO NOT WRITE	IN THIS SP	ACE		
City & State Sanibel Island, Florida		City & State Sanibel Island, Florida				4. FEI Number	65-0500026			plied For t Applicable	
^{Zj} 3957	Country	33 ⁸ 57	Coun USA	try] !	5. Certificate of S	Status Desired		8.75 Add ee Required		
	6. Name and Address of Current R	egistered Agent		Nome	7	7. Name and Ad	dress of New Reg	istered Ag	jent		
	LIFF, ROBERT L III) PERIWINKLE WAY			Street A	ddress (P.C	obert Lee D. Box Number is inkle Way	Box Number is Not Acceptable) nkle Way				
	E J-3		Suite	- T−2	•						
SAN	IBEL ISLAND FL 33957		City	ibel Island FL Zip Code 33957							
8. The above	named entity submits this statement for	the purpose of changing its	register				the State of Floric	ia.	A	<i>-</i>	
SIGNATURE.	Signature, typed or printed name of registered agent an	d tule if applicable. (NOTI	: Registere	d Agent signat	ure required whi	en reinstating)		DATE			
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			550.00	10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees					
11.	OFFICERS AND D		12.			ADDITIONS/CH	ANGES TO OFFIC				
TITLE NAME	Pstd Ratliff, Robert L III	☐ Delete	TITL		PSTD Ratli	ff. Rober	t Lee III	2	Change	Addition Addition	
STREET ADDRESS	2430 PERIWNIKLE WAY SUITE J	3		ET ADDRESS			e Way, Sui	te I-2	2		
CITY-ST-ZIP	SANIBEL ISLAND FL 33957	☐ Delete		-ST-ZIP	Sanib	el Island	, Florida	33957	Change	Addition	
TITLE Name		☐ Delete	NAM								
STREET ADDRESS				ET ADDRESS -ST-ZIP]	60	00031	613	376- 199-	- -7	
CITY-ST-ZIP	1	☐ Delete	TITL		 -		<u>-03/07/0</u> ****150	1 UU 1	1020 開始組織5	ゼ <u>ゴ</u> RE TRO blition	
NAME		L Delete	NAM					,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		J-2-5	
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS -ST-ZIP							
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NAME			NAM								
STREET ADDR'SS CITY-ST-ZIP				ET ADDRESS -ST-ZIP							
TITLE		☐ Delete	TITL	 E					Change	Addition	
NAME CTREET ADDRESS			NAM	E ET ADDRESS	-						
STREET ADDRESS CITY-ST-ZIP				-ST-ZIP							
TITLE		☐ Delete	TITU						☐ Change	Addition	
NAME STREET ADDRESS			NAM STRI	E Et address							
CITY-ST-ZIP				-ST-ZIP							
indicated	certify that the information supplied with to on this report or supplemental report is a poration or the receiver or trustee empore, or on an attachment with an address, we	true and accurate and that r	ny signa as requi	ture shall h	lave the sar	me legal effect as	: if made under oat	h: that I arr	n an officer i	or director	

-22-PD 941-3

941-395-1300

Daytime Phone #