

2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0683791 FP

DOCUMENT # P94000016119



1. Entity Name
REGAL TRADE CONSULTANTS CORPORATION

FILED
SECRETARY OF STATE
OFFICE OF CORPORATE FILLS
04 FEB 27 PM 2:25

Principal Place of Business
11111 BISCAYNE BLVD
#1154
MIAMI FL 33181

Mailing Address
% JAMES R. SABATINO
11111 BISCAYNE BLVD..TOWER 3. #1154
MIAMI FL 33181



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number 65-0632857

Applied For
Not Applicable

Zip Country

Zip Country

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

SABATINO, JAMES R
1177 KANE CONCOURSE
SUITE 101
BAY HARBOR ISLANDS FL 33154

Name
Street Address (P.O. Box Number is Not Acceptable)
~~300838066473~~
03/09/04--01037--003 **150.00
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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DP	SABATINO, JAMES R	1177 KANE CONCOURSE, #101	BAY HARBOR ISLANDS FL 33154				
S	GEERTSMA, GARRY M	10281 E. BAY HARBOR DRIVE	BAY HARBOR ISLANDS FL 33154				

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: *James R. Sabatino* President 2-23-04 305-865-9831
Date Daytime Phone #

CRE034 (10/02)