

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000002867

1. Entity Name

POTOMAC TRADERS CORP.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90018 026 ***550.00

Principal Place of Business

10481 N KENDALL DRIVE
D 203-C
MIAMI FL 33176
US

Mailing Address

7935 S.W. 86TH STREET
NO. 801
MIAMI FL 33143-0000

2. Principal Place of Business

3. Mailing Address

5162 NE 6TH AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

320

City & State

City & State

OAKLAND PARK, FL

Zip

Country

Zip

Country

33334

USA

4. FEI Number

65-0550015

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

SANTOS, ANTONIO J
7935 S.W. 86TH STREET
NO. 801
MIAMI FL 33143-0000

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD ☐ Delete
NAME SANTOS, ANTONIO J
STREET ADDRESS 7935 S.W. 86TH ST. #801
CITY-ST-ZIP MIAMI FL 33143-0000

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

TITLE D ☐ Delete
NAME SANTOS, ANDRE
STREET ADDRESS 7935 S.W. 86TH ST. #801
CITY-ST-ZIP MIAMI FL 33143-0000

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

TITLE D ☐ Delete
NAME SANTOS, JOSE S
STREET ADDRESS SCN Q. 01 BL C-149 BRAZILIA D.F.
CITY-ST-ZIP BRAZIL 70910-912

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

ANTONIO J. SANTOS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/00

Date

(954) 938-6933

Daytime Phone #

CR2E034 (5/00)