

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000007244

1. Entity Name

HIGHLANDER TRADING CORPORATION

Principal Place of Business

9600 NW 25TH ST
STE 6C
MIAMI FL 33172
US

Mailing Address

9600 NW 25TH ST
STE 6C
MIAMI FL 33172-1416
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

65-0552526

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

HAY, MICHELLE
357 FAIRMONT RD
FT LAUDERDALE FL 33326

Name WILLIAM HAY

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

City FT. LAUDERDALE FL Zip Code 33326

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

11 JAN 2000

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

TITLE D ☒ Delete
NAME HAY, MICHELLE
STREET ADDRESS 357 FAIRMONT RD
CITY-ST-ZIP FT LAUDERDALE FL 33326

TITLE P ☐ Delete
NAME WILLIAM R. D. HAY
STREET ADDRESS 357 FAIRMONT ROAD
CITY-ST-ZIP WESTON FL

TITLE S ☒ Delete
NAME CHRISTINE M. BROWNING
STREET ADDRESS 14731 SW 54TH TERRACE
CITY-ST-ZIP MIAMI FL

TITLE VP ☐ Delete
NAME GLENN BROWNING
STREET ADDRESS 14731 SW 54TH TERRACE
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☒ Change ☐ Addition
NAME GLENN BROWNING
STREET ADDRESS 8625 CARIBBEAN BLVD.
CITY-ST-ZIP MIAMI FL 33157

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11 JAN 2000 (305) 463-7000

FILED
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90012 012 ***150.00



DO NOT WRITE IN THIS SPACE