

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90021 006 ***150.00

DOCUMENT # P95000019186

1. Entity Name

INTERLINE TRADING, INC.

Principal Place of Business

10520 SW 158TH COURT #205
MIAMI FL 33196

Mailing Address

10520 SW 158TH COURT #205
MIAMI FL 33196-4210

2. Principal Place of Business

15304 SW 111 STREET

Suite, Apt. #, etc.

3. Mailing Address

15304 SW 111 STREET

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33196

Country

Zip

33196

Country

4. FEI Number

65-0567082

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SALAZAR, ALEJANDRO ✓

10520 SW 158TH COURT #205
MIAMI FL 33196 ✓

15304 SW 111 STREET

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

TITLE P
NAME SALAZAR, ALEJANDRO J ✓
STREET ADDRESS 10520 SW 158TH COURT #205
CITY-ST-ZIP MIAMI FL 33196 ✓
15304 SW 111 ST.

TITLE V
NAME PAIPA, FREDDY J ✓
STREET ADDRESS 10520 SW 158TH COURT #205
CITY-ST-ZIP MIAMI FL 33196 ✓
15304 SW 111 ST.

TITLE S
NAME UGARTE, IRELMA M ✓
STREET ADDRESS 10520 SW 158TH COURT #205
CITY-ST-ZIP MIAMI FL 33196 ✓
15304 SW 111 ST.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 25-2000

Date

(305) 9783514

Daytime Phone #