## 2002 UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE:** 

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # P95000074410  1. Entity Name  A C G TRADING, INC.						Secretary of State 02-17-2002 90051 015 ***150.00					
1100 LEE WA	ce of Business AGNER BLVD SUPPE 302 DALE FL 33315	Mailing Address  1100 LEE WAGNER BLVD SUITE-302  FT. LAUDERDALE FL 33315									
2. Principal Place of Business 1100 Lee Wagener BWd 3. Mailing Address						T S HORIHORE SHE HANGH GUSHI GOSHI AGNIK ARRIN BRUH SERIK BIRIN BI					
Suite, Apt.	.#, etc. 2 351	Suite, Apt. #, etc. Suite 351				DO NOT WRITE IN THIS SPACE					
City & Stat	te anderdale, FL	City & State			<b>4</b> . F	El Number	65-0610179	9		pplied For at Applicable	
Zip <b>33</b>	315 Country	Zip	Cour	itry	5. 0	ertificate of	Status Desired		<b>8.75</b> Addee Required		
	6. Name and Address of Current F	legistered Agent		Name	7. N	ame and A	ddress of New	Registered A	gent		
TAMMA, MICHELE  1100 LEE WAGNER BLVD., SUITE 302 Suite 351  FT. LAUDERDALE FL 33315				Street Address (P.O. Box Number is Not Acceptable)							
				City				FL	Zip Code	Э	
Tax filing		FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State			) tate	10. Election Campaign Financing \$5.00 May Be					
11. TITLE	PD OFFICERS AND D	DIRECTORS Delete	12.	E	ADI	DITIONS/C	HANGES TO OF		DIRECTORS Change	S IN 11	
NAME Street address City-St-Zip	TAMMA, ANTHONY   1100 LEE WAGNER BLVD., SUJTE   FT. LAUDERDALE FL 33315			E, EET ADDRESS -ST-ZIP	5	Surte 351					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS TAMMA, CARLA 1100 LEE WAGNER BLVD., SUITE FT. LAUDERDALE FL 33315	□ Delete <b>-362</b>			5	uite	351		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TAMMA, MICHELE 1100 LEE WAGNER BLVD., SUITE-302			E E EET ADDRESS -ST-ZIP	•	Swit	e 351		<b>⊕</b> <del>ena</del> nge	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	· • • • • • • • • • • • • • • • • • • •	□ Delete					and supplementary from the first of the firs		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							☐ Change	Addition	
indicated of the cor	certify that the information supplied with to lon this report or supplemental report is to poration or the receiver or trustee empoy or on an attachment with an address, with	rue and accurate and that maked the second accurate this report a	y signat	ture shall have the	e same le	egal effect a	as if made under	oath; that I ar	n an officer	or director	

1/30/2002 (954) 359-984

Attachment #195000074410 135784

Please note change of address from Suite 302 to Suite 357. The rest of the address remains undranged - Thembe you.

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