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FILED

Feb 26 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000095845 (0)

1. Corporation Name

FIRST UNIVERSAL TRADERS, INC.



Principal Place of Business

Mailing Address

8880 NORTHWEST 30 STREET, UNIT 1  
CORAL SPRINGS FL 33065

8880 NORTHWEST 30 STREET, UNIT 1  
CORAL SPRINGS FL 33065-5273

3. Date Incorporated or Qualified

01/01/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Subd. Airt. #, etc.

26 Subd. Airt. #, etc.

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

23 Zip

25 Country

28 Zip

30 Country

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name

AMIAN, Stanley

82 Street Address (P.O. Box Number is Not Acceptable)

8860 N.W. 30 ST #1

83

84 City

CORAL SPRINGS

FL

85 Zip Code

33065

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.

SIGNATURE

Signature of the corporation's registered agent (if applicable)

(NOTE: Registered Agent's signature required when reinstating)

DATE

01/31/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME AMIAN, SIEGFRIED S  
STREET ADDRESS 8880 NORTHWEST 30 STREET, UNIT 1  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE VD  
NAME AMIAN, DANNY STEPHAN  
STREET ADDRESS 8880 NORTHWEST 30 STREET, UNIT 1  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE SD  
NAME AMIAN, JASON DAVID  
STREET ADDRESS 8880 NORTHWEST 30 STREET, UNIT 1  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE TD  
NAME AMIAN, ALAN MILTON  
STREET ADDRESS 8880 NORTHWEST 30 STREET, UNIT 1  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D  
NAME AMIAN-TOWER, GISLA IRENE  
STREET ADDRESS 8880 NORTHWEST 30 STREET, UNIT 1  
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/97

Date

954-704-2504

Daytime Phone

0150043

CR2E034 (9/96)