2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P96000000435 DOCUMENT

1. Entity Name

SIGNATURE:

TRADERS CONSORTIUM INC.

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FILED May 05, 2003 8:00 am Secretary of State

05-05-2003 90218 029 ***158.75

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Principal Place of Business 3204 NE 8TH CT. STE 5A POMPANO BEACH FL 33062 US		P.O. BO	Mailing Address P.O. BOX 21701 FORT LAUDERDALE FL 33335-1701 US						
	ace of Business	. 3. Mailir	. 3. Mailing Address			I (DENIED) ILO LERIO ELITA BOLLI DO	NI 8611 8611 4611 6611 6	LISBS 1461 Bill 1884	
Suite, Apt. #	ŧ, etc.	Suite,	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City 8	City & State			4. FEI Number 65-0629700		Applied For Not Applicable	
Zip	Country	Zip		Country		5. Certificate of Status Desired	\$8.75 Fee Re	Additional quired	
	6. Name and Address of Cur		Agent			7. Name and Address of New F	legistered Agent		
		ميسا سيدي يا ال	· 	Name					
RAHMAN, (3204 NE 81	Golamur TH CT. STE. 5A			Street Ad	dress (P.0	O. Box Number is Not Acceptable	e)		
! <u> </u>	BEACH FL 33062								
,	•			City			FL Zip	Code	
8. The above	named entity submits this stateme ons of registered agent.	nt for the purpos	se of changing its	s registered office or	registered	d agent, or both, in the State of Fl	orida. I am familiar	with, and accept	
SIGNATURE _	Signature, typed or printed name of registered	agent and title if anglia	oble (NOT	E: Registered Agent signatu	o territori ud	no visaletina)	DATE		
			able. (NO	re: Hegistered Agent signatu	e ledolled wi	merrialistating)	DAIE		
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550 Payable to Florida Departme	.00	,			9. Election Campaign Fi Trust Fund Contribution		55.00 May Be Added to Fees	
10.	OFFICERS A	AND DIRECTOR	S	11.		ADDITIONS/CHANGES TO OF	ICERS AND DIREC	TORS IN 11	
THE IS	P		Delete	TITLE			☐ Cha	ange 🔲 Addition	
NAME	GOLAMUR, RAHMAN 3204 NE 8TH CT. STE. 5A			NAME				ì	
	POMPANO BEACH FL 33062			STREET ADDRESS CITY-ST-ZIP					
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indicatéd o	ertify that the information supplied on this report or supplemental rep- poration or the receiver or frustee e or on an attachment with an active	ort is true and a	ccurate and that record	my signature shall ha as required by Char	ve the sai	me legal effect as if made under	oath; that I am an of e appears in Block	fficer or director 10 or Block 11 if	

D NAME OF SIGNING OFFICER OR DIRECTOR