

2000 UNIFORM BUSINESS REPORT (UBR)

9/18/00-90029-049-\$150.00-\$150.00

DOCUMENT # P96000010202

1. Entity Name

TRADE ELECTRONICS CO. INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 19 AM 9:28

A0079002



DO NOT WRITE IN THIS SPACE

Principal Place of Business 6640 COLLINS MIAMI BEACH FL 33141	Mailing Address 6640 COLLINS MIAMI BEACH FL 33141
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0648501	☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent KNAUSEDEROVA, KARINA 6640 COLLINS MIAMI BEACH FL 33141	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number Is Not Acceptable) City FL Zip Code
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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 N/A N/A
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 \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNAUSEDEROVA, KARINA C/O 6640 COLLINS MIAMI BEACH FL 33141 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PINEDA, JOSE A C/O 6640 COLLINS MIAMI BEACH FL 33141 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 9-11-2000 325-501040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED34 (15/00)

9-29-2000

DEAR SIR,

IN REFERENCE NUMBER: P96000010202

WE DID MAIL A CHECK OF \$150⁰⁰ BECAUSE
THE PREVIOUS LETTER WITH CHECK #1022
MADE TO DEPARTMENT STATE WITH
ANNUAL REPORT GOT LOST IN THE
MAIL.

THEREFORE NO PENALTY OF \$400⁰⁰
FOR LATE FEE SHOULD BE CHARGED.

PROOF DOCUMENTS COULD BE
PROVIDED UPON YOUR REQUEST.

PLEASE

DO NOT DEPOSIT THIS CHECK FOR

\$400⁰⁰ AND CREDIT US WITH THE

\$400⁰⁰ LATE FEE CHARGE.

FOR FURTHER INFORMATION: T.E.C. 6640 COLLINS AL.
M.B. FL. 33141

THANK YOU,

BEST REGARDS

KARINA

KARINA SEBASTIANA

