

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000033455

1. Entity Name

RBV TRADING, INC.

**FILED**  
**Jul 25, 2001 8:00 am**  
**Secretary of State**

07-25-2001 90006 026 \*\*\*158.75

Principal Place of Business

Mailing Address

800 CLAUGHTON ISLAND DR.  
 #2503  
 MIAMI, FLORIDA 33131

800 CLAUGHTON ISLAND DR.  
 #2503  
 MIAMI, FLORIDA 33131

00074225

2. Principal Place of Business

800 CLAUGHTON ISLAND DR.

3. Mailing Address

800 CLAUGHTON ISLAND DR.

Suite, Apt. #, etc.

UNIT 2503

Suite, Apt. #, etc.

UNIT # 2503

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33131

Country

USA

Zip

33131

Country

USA

4. FEI Number

65-0875397

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SPIEGEL & UTNERA, P.A.  
 1840 CORAL WAY, 4th Floor.  
 MIAMI, FLORIDA 33145

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, 2001 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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
 RAFAEL BOTERO  
 800 CLAUGHTON ISLAND DR. #2503  
 MIAMI, FLORIDA 33131

☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAFAEL BOTERO

Date

7/16/01

Daytime Phone #

305.815.2802

CR2E034 (11/00)