

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000052072

1. Entity Name

SOUTH FLORIDA WORLD TRADERS, INC.

FILED

Mar 10, 2000 8:00 am  
Secretary of State

03-10-2000 90031 005 \*\*\*150.00

Principal Place of Business

Mailing Address

12237 NW 35TH ST  
CORAL SPRINGS FL 33065

12237 NW 35TH ST  
CORAL SPRINGS FL 33065-2509

NEW Address

2. Principal Place of Business

12201 NW 35th St  
Suite, Apt. #, etc.  
#207

3. Mailing Address

Suite, Apt. #, etc.

City & State

Coral Springs

City & State

FL

Zip

33065

Country

Zip

Country

4. FEI Number

65-0676441

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

ARANOWITZ, ROBERT  
12237 NW 35TH ST  
CORAL SPRINGS FL 33065

## 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, 2000 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 ☐ Delete  
NAME D  
STREET ADDRESS ARANOWITZ, ROBERT  
CITY-ST-ZIP 12237 NW 35TH ST  
CORAL SPRINGS FL 33065

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME Robert Aranowitz  
STREET ADDRESS 12201 NW 35th St #207  
CITY-ST-ZIP Coral Springs, FL 33065

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

3/6/2000

Date

954-340-4866

Daytime Phone #

CR2E034 (9/99)