2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000074678

1. Entity Name

NORBERT TRADING CORPORATION

802 KINGSPOINTE PKWY

6. Name and Address of Current Registered Agent

Principal Place of Business

2. Principal Place of Business

ANDO

DUARTE, NORBERTO R

446 WATER STREET **CELEBRATION FL 34747** Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

ORLANDO

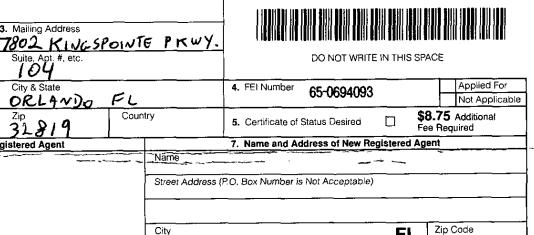
City & State

7468 UNIVERSAL BLVD. COLUMNO FL 32819

7468 UNIVERSAL BLVD. ORLANDO FL 32819-8524

Apr 24, 2000 8:00 am Secretary of State

04-24-2000 90007 050 ***150.00



8. The above	named entity submits this statement for the	purpose of changing its re	gistered office or register	red agent, or both, in the State of Flor	rida,	
SIGNATURE	Signature, typed or printed name of registered agent and in	le if applicable. (NOTE. R	egistered Agent signature required	d when reinstaling)	DATE	
Tax filing requirement and elects to do so. After MAY 1, 2000		FEE IS \$150.00 Fee will be \$550.00 to Department of Sta		n. 🗆 Adde	00 May Be d to Fees	
11. OFFICERS AND DIRECTORS			12.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	RS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD DUARTE, NORBERTO R 446 WATER STREET CELEBRATION FL 34747	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CORREA, JOSE C 7468 UNIVERSAL BLVD. ORLANDO FL 32819	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DUARTE, NORBERTO R 446 WATER STREET CELEBRATION FL 34747	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- ·	Change	Addition -
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Country

Name

City

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 att other like empowered.

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

Паве

Daytime Phone #