

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name

Vertex Trading Corporation

Principal Place of Business

Mailing Address

15200 SW 81 Ave.
Miami, FL 33157

Same

2. Principal Place of Business

15200 SW 81 Ave
Suite, Apt. #, etc.

3. Mailing Address

Same
Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Zip

33157

Country

US

Country

6. Name and Address of Current Registered Agent

4. FEI Number

65-0698688

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

00074496

7. Name and Address of New Registered Agent

Name

Maria H. Guardia

Street Address (P.O. Box Number is Not Acceptable)

15200 SW 81 Ave.

City

miami

FL

Zip Code

33157

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

Maria H. Guardia

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/16/00

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

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

TITLE

☐ Delete

NAME

STREET ADDRESS

CITY - ST - ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

☐ Change

☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ Change

☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ Change

☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

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☐ Addition

NAME

STREET ADDRESS

CITY - ST - ZIP

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:

Maria H. Guardia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/00 (305) 471-7773

Date

Daytime Phone #

CR2E034 (9/99)