

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90113 036 ***150.00

DOCUMENT # P97000009064

1. Entity Name

EUROTRADE USA INC.

Principal Place of Business

12360 66TH STREET NORTH
SUITE T
LARGO FL 33773
US

Mailing Address

12360 66TH STREET NORTH
SUITE T
LARGO FL 33773-3434
US

2. Principal Place of Business

1059 Broadway

3. Mailing Address

1059 Broadway

Suite, Apt. #, etc.

Suite G

Suite, Apt. #, etc.

Suite G

City & State

Dunedin FL

City & State

Dunedin FL

Zip

34698

Country

USA

Zip

34698

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3422367

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FAGERMAN, MORGAN
20505 US 19 NO. SUITE #12-272
CLEARWATER FL 34624

7. Name and Address of New Registered Agent

Name

Morgan Fagerman

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

447 Grant St.

City

Dunedin

FL

Zip Code

34698

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 **PST** ☐ Delete
NAME **FAGERMAN, MORGAN**
STREET ADDRESS **20505 US 19 NO. SUITE #12-272**
CITY-ST-ZIP **CLEARWATER FL 34624**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
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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 **PST** ☒ Change ☐ Addition
NAME *Fagerman, Morgan*
STREET ADDRESS *447 Grant St.*
CITY-ST-ZIP *Dunedin, FL 34698*

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

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

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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:

MORGAN FAGERMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/21/2000

Daytime Phone #

727 733 5721

CR2E034 (9/99)