

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90049 046 \*\*\*150.00

**DOCUMENT #** P97000010966

**1. Entity Name**

Industrial Trade Ventures Inc.

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

6437 N. Bay Road

Suite, Apt. #, etc.

**3. Mailing Address**

6437 N. Bay Road

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**

Miami Beach, FL

**City & State**

Miami Beach, FL

**4. FEI Number**

650736406

**Applied For**

**Not Applicable**

**Zip**

33141

**Country**

USA

**Zip**

33141

**Country**

USA

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

**Name**

Lilian Sredni, Esq.

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

20900 W. Dixie Hwy.

**City**

North Miami Beach

**FL**

**Zip Code**

33180

**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**

*Lilian Sredni*

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

(NOTE: Registered Agent Signature required when reinstating)

*4/18/02*

DATE

**9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)**

☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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**

<b>TITLE</b>	Director
<b>NAME</b>	Paul Sterental
<b>STREET ADDRESS</b>	1911 NE 118th Road
<b>CITY - ST - ZIP</b>	N. Miami, FL 33181
<b>TITLE</b>	President
<b>NAME</b>	Elena Salomon
<b>STREET ADDRESS</b>	1911 NE 118th Road
<b>CITY - ST - ZIP</b>	N. Miami, FL 33181
<b>TITLE</b>	Secretary
<b>NAME</b>	Rosa Behar.
<b>STREET ADDRESS</b>	1911 NE 118th Road
<b>CITY - ST - ZIP</b>	N. Miami, FL 33181
<b>TITLE</b>	Treasurer
<b>NAME</b>	Silvia Levy
<b>STREET ADDRESS</b>	1911 NE 118th Road
<b>CITY - ST - ZIP</b>	N. Miami, FL 33181
<b>TITLE</b>	
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	
<b>TITLE</b>	
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<b>STREET ADDRESS</b>	
<b>CITY - ST - ZIP</b>	

**DO NOT WRITE  
IN THIS SPACE**

**13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/15/02*

Date

*305 932 0896*

Daytime Phone #

CR2E034B (12/01)