

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000051111

1. Entity Name

WEB TRADE, CORP.

**FILED**  
**May 09, 2000 8:00 am**  
**Secretary of State**

05-09-2000 90118 018 \*\*\*150.00

Principal Place of Business

Mailing Address

10190 BOCA ENTRADA BLVD  
 SUITE 211  
 BOCA RATON FL 33428

10190 BOCA ENTRADA BLVD  
 SUITE 211  
 BOCA RATON FL 33428-5842

2. Principal Place of Business

1901 NE 32 ST.  
 Suite, Apt. #, etc.  
 BAY 7

3. Mailing Address

10190 BOCA ENTRADA BLVD.  
 Suite, Apt. #, etc.  
 SUITE #211



DO NOT WRITE IN THIS SPACE

City & State

POMPANO BEACH FL.

City & State

BOCA RATON FL

4. FEI Number

65-0779223

Applied For

Not Applicable

Zip

33069

Country

BARBADOS

Zip

33428

Country

PALM BEACH

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

GUNTHER, EMILIO MIGUEL  
 10190 BOCA ENTRADA BLVD  
 SUITE 211  
 BOCA RATON FL 33428

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	DP	<input type="checkbox"/> Delete
NAME	GUNTHER, EMILIO MIGUEL	
STREET ADDRESS	10190 BOCA ENTRADA BLVD, #211	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUNTHER, JOAQUIN ANDRES	
STREET ADDRESS	10190 BOCA ENTRADA BLVD, #211	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	DS	<input type="checkbox"/> Delete
NAME	GUNTHER, ALICIA BEATRIZ	
STREET ADDRESS	10190 BOCA ENTRADA BLVD, #211	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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

EMILIO GUNTHER  
 PRES.

3/31/00

Date

Daytime Phone #

CR2E034 (9/99)