

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 21, 2002 8:00 am**  
**Secretary of State**

01-21-2002 90026 029 \*\*\*158.75

**DOCUMENT # P97000096388**

1. Entity Name  
**P I C TRADING, INC.**

Principal Place of Business  
**8260 NORTH WEST 68TH STREET**  
**MIAMI FL 33166**

Mailing Address  
**8260 NORTH WEST 68TH STREET**  
**MIAMI FL 33166**

2. Principal Place of Business  
**8602 N.W. 66th St**

3. Mailing Address  
**8602 N.W. 66th St**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**MIAMI - FL**

City & State  
**MIAMI - FL**

Zip  
**33166**

Country  
**U.S.A**

Zip  
**33166**

Country  
**U.S.A**

DO NOT WRITE IN THIS SPACE



4. FEI Number **65-0793105**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**ALVAREZ, NAIME ALE**  
~~**8260 NORTH WEST 68TH STREET**~~  
**MIAMI FL 33166**

## 7. Name and Address of New Registered Agent

Name **ALVAREZ, NAIME ALE**  
 Street Address (P.O. Box Number is Not Acceptable) **8602 NW 66ST**  
 City **MIAMI** FL **33166**

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 *Naime Ale Alvarez*  
 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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PSD</b> <b>ALVAREZ, NAIME ALE</b> <del><b>8260 NORTH WEST 68TH STREET</b></del> <del><b>MIAMI FL 33166</b></del>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VTD</b> <b>ALVAREZ, FERNANDO L</b> <del><b>8260 NORTH WEST 68TH STREET</b></del> <del><b>MIAMI FL 33166</b></del>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8602 NW 66 ST</b> <b>MIAMI, FL 33166</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>8602 NW 66 ST</b> <b>MIAMI, FL 33166</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Naime Ale Alvarez*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02 (305) 599-9800  
 Date Daytime Phone #

CR2E034 (9/01)