

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000096902

1. Entity Name
MARGRANT TRADING, INC. ✓

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90040 046 ***150.00

715055

Principal Place of Business
7427 NW 48TH STREET
MIAMI, FL 33166

Mailing Address
7427 NW 48TH STREET
MIAMI, FL 33166

2. Principal Place of Business
1917 40TH COURT COURT 10

3. Mailing Address
1917 NW 40TH COURT 10

Suite, Apt. #, etc.
SUITE #9

Suite, Apt. #, etc.
SUITE #9

City & State
POMPANO BEACH, FLORIDA

City & State
POMPANO BEACH, FLORIDA

Zip
33064

Country
USA

Zip
33064

Country
USA

4. FEI Number
65-0793761

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GILMAR OSORIO CARNEIRO DOS SANTOS
9591 FONTAINBLEAU BLVD.
#614
MIAMI, FL 33172

7. Name and Address of New Registered Agent

Name
GILMAR OSORIO CARNEIRO DOS SANTOS

Street Address (P.O. Box Number is Not Acceptable)
2535 JARDIN WESTON HILLS

City
WESTON

FL Zip Code
33326

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
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

PSD
GILMAR OSORIO CARNEIRO DOS SANTOS
2535 JARDIN WESTON HILLS
WESTON, FL 33326

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

VTD
ERANDYR F. CASTRO
350 SE 2ND AVENUE #E
DEERFIELD BEACH, FL 33064

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
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CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ 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:  -- PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/00 (954) 968-7573

Date

Daytime Phone #