

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000004824**

1. Entity Name

WORLDWIDE TRADING ASSOCIATES, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90135 017 ***150.00

Principal Place of Business

**19921 NORTHEAST 22ND COURT
NORTH MIAMI BEACH FL 33180**

Mailing Address

**19921 NORTHEAST 22ND COURT
NORTH MIAMI BEACH FL 33180-1805**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0806064

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SERBER, DANIEL J ESQ.
25 SE 2ND AVENUE
SUITE 730
MIAMI FL 33134**

Name

Oren Manelis

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

2065 NE 198th Terrace

City

No. Miami Beach

FL

Zip Code

33179

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]

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

(NOTE: Registered Agent signature required when reinstating)

4/11/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **PARNES, BENJAMIN B**
CITY-ST-ZIP **19921 NORTHEAST 22ND COURT
NORTH MIAMI BEACH FL 33180**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **MANELIS, OREN**
CITY-ST-ZIP **1941 NORTHEAST 198TH TERRACE
NORTH MIAMI BEACH FL 33179**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2065 NE 198th Terrace**
CITY-ST-ZIP **No. Miami Beach, FL 33179**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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CITY-ST-ZIP

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)(l), 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/2000

DATE

305-372-3979

Daytime Phone #

CR2E034 (9/99)