

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000057217

1. Entity Name

SUNWARD TRADING, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90148 016 ***150.00

Principal Place of Business

2122 SW 67TH AVE.
SUITE A OFFICE #3
MIAMI FL 33155

Mailing Address

2122 SW 67TH AVE.
SUITE A OFFICE #3
MIAMI FL 33155-1838

2. Principal Place of Business

7171 CORAL WAY

3. Mailing Address

7171 CORAL WAY

Suite, Apt. #, etc.

SUITE 402

Suite, Apt. #, etc.

SUITE 402

City & State

MIAMI, FL.

City & State

MIAMI, FL.

Zip

33155

Country

USA

Zip

33155

Country

USA

4. FEI Number

65-0852289

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

HAUGLAND, MARIA H
2122 SW 67TH AVE.
SUITE A OFFICE #3
MIAMI FL 33155

Name

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

7171 CORAL WAY, SUITE 402

City

MIAMI,

FL

Zip Code

33155

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

Maria Haugland

4/24/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
HAUGLAND, MARIA H
2122 SW 67TH AVE.
MIAMI FL 33155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
7171 CORAL WAY, SUITE 402
MIAMI, FL. 33155 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
HAUGLAND, MARIA H
2122 SW 67TH AVE.
MIAMI FL 33155 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
7171 CORAL WAY, SUITE 402
MIAMI, FL. 33155 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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:

Maria Haugland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2000 (305) 260-0035

Date

Daytime Phone #

CR2E034 (9/99)