

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 18, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000060430**1. Entity Name
NORTH & SOUTH TRADING COMPANY**Principal Place of Business**

7345 SAND LAKE RD. #208

ORLANDO
32819

FL

Mailing Address

7345 SAND LAKE RD. #208

ORLANDO
32819

FL

2. Principal Place of Business

7345 SAND LAKE RD. #228

3. Mailing Address

7345 SAND LAKE RD. #228

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO

FL

City & State

ORLANDO

FL

4. FEI Number**59-3524092**

Applied For

Not Applicable

Zip
32819

Country

Zip
32819

Country

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****SUTTON LUTY**

7345 SAND LAKE RD. #228

ORLANDO

32819

US

FL

7. Name and Address of New Registered Agent

Name

SUTTON DONALD D

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

7345 SAND LAKE RD. #228

City

ORLANDO

FL

Zip Code
32819

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 **DONALD A. SUTTON****04/18/2001**

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, 2001 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	SD	<input checked="" type="checkbox"/> Delete
NAME	SUTTON DONALD	
STREET ADDRESS	7345 SAND LAKE RD. #208	
CITY-ST-ZIP	ORLANDO FL 32819	

TITLE	PTD	<input type="checkbox"/> Delete
NAME	SUTTON LUTY	
STREET ADDRESS	7345 SAND LAKE RD. #228	
CITY-ST-ZIP	ORLANDO FL 32819	

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		

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	PSD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	SUTTON DONALD A		
STREET ADDRESS	7345 SAND LAKE RD. #228		
CITY-ST-ZIP	ORLANDO FL 32819		

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: DONALD A. SUTTON

P

04/18/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)