2002 UNIFORM BUSINESS REPORT (UBR)

Jul 18, 2002 8:00 am Secretary of State **DOCUMENT#** P98000065548 1. Entity Name 07-18-2002 90128 015 ***150.00 B. TRADERS, INC. Principal Place of Business Mailing Address 5024 MICHIGAN AVENUE 5024 MICHIGAN AVENUE WEST PALM BEACH FL 33415 WEST PALM BEACH FL 33415 2. Principal Place of Business 3. Mailing Address Y911 5 Con 62655 7911 S. CONGRESS AVE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Gity & State City & State LAKE WORTH 4. FEI Number Applied For 65-0853551 Zip 33-161 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Fee Required 7. Name and Address of New Registered Agent SHAH, BHARTI Street Address (P.O. Box Number is Not Acceptable) **5024 MICHIGAN AVENUE** BUSSENS WEST PALM BEACH FL 33415 Zip Code 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. I am familiar with, and accept 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 FILE NOW!!! FEE 18 \$550.00 Tax filing requirement and elects to do so. 10. Election Campaign Financing After September 13, 2002 Fee will be \$750.00 \$5.00 May Be (See criteria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D ☐ Delete TITLE SHAH, BHARTI Addition NAME STREET ADDRESS **5024 MICHIGAN AVENUE** LAKE WOLFT KE 33461 STREET ADDRESS C!TY-ST-ZIP WEST PALM BEACH FL 33415 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE ☐ Delete TITLE ☐ Change NAME Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME ☐ Change Addition NAME

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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-7IP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

(561)641-0446

FILED

AHackhent A80000655-48

DELISI ACCOUNTING & TAX SERVICES, INC.

Martin V. DeLisi, EA

Accountant and Tax Consultant

4361 Northlake Boulevard

Palm Beach Gardens, Florida 33410

(561-622-31622 Fax (561-626-9857)

JULY 15, 2002

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

RE: B. TRADER, INC. 65-0853551

TO WHOM IT MAY CONCERN;

ENCLOSED PLEASE FIND FORM 2002 UNIFORM BUSINESS REPORT AND CHECK IN THE AMOUNT OF \$ 150.00.

PLEASE ACCEPT THIS PAYMENT FOR MY CLIENT AS THEY HAD MOVED LAST YEAR AND JUST RECEIVED THE ENCLOSED FORM FROM THE POST OFFICE.

WOULD APPRECIATE YOUR CONSIDERATION IN THIS MATTER.

THANK YOU.

VERY TRULY YOURS,

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MARTIN V. DELISI, EA