

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

1. Entity Name P98000066867

SHARPTRADER, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

150 S. Pine Island Rd.

3. Mailing Address

150 S. Pine Island Rd.

Suite, Apt. #, etc.  
Suite 440

Suite, Apt. #, etc.  
Suite 440

City & State  
Plantation, FL

City & State  
Plantation, FL

Zip  
33324

Country  
USA

Zip  
33324

Country  
USA

4. FRI Number  
650853658

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
Harry Tippins

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

3609 Cleveland Street

City  
Hollywood

FL

Zip Code  
33021

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 transacting)

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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-STATE-ZIP  
PD - Octavio Slemmer  
10911 NW 3 Street  
Plantation, Florida 33322

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
VPD - Harry Tippins  
3609 Cleveland Street  
Hollywood, Florida 33021

TITLE  
NAME  
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CITY-STATE-ZIP

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500010132395  
01/15/03--01/05--010 \*\*150.00

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(d), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

By: Octavio Slemmer, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/11/2002

954.382.0348

FILED

02 DEC 20 PM 4:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2002 UBR

CR2E034B (12/01)

December 11, 2002

282

Florida Department of State

Re: SHARPTRADER, INC.

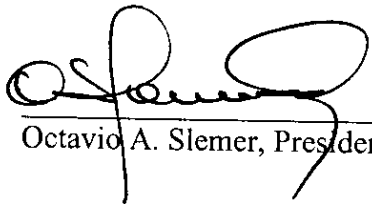
Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. \$150 check payable to Florida Department of State.

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved.

Thank you.

Sincerely,



Octavio A. Slemer, President