

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91612 048 \*\*\*150.00

DOCUMENT # P98000070466  
1. Entity Name

BBS TRADING INC.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2700 GLADES CIRCLE

Suite, Apt., etc.  
# 106

City & State  
WESTON, FLORIDA

Zip  
33327

Country  
USA

3. Mailing Address

2700 GLADES CIRCLE

Suite, Apt., etc.  
106

City & State  
WESTON, FLORIDA

Zip  
33327

Country  
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-086555

Applied For  
Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name  
CESAR BETTENCOURT

Street Address (P.O. Box Number is Not Acceptable)  
2700 GLADES CIRCLE

SUITE 106

City  
WESTON

FL

Zip Code  
33327

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

April 19, 2002

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 - ST - ZIP  
CESAR BETTENCOURT  
DIRECTOR  
2700 GLADES CIRCLE, SUITE 106  
WESTON, FL, 33327

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
ELIO SAUJO  
DIRECTOR  
2700 GLADES CIRCLE, SUITE 106  
WESTON, FL, 33327

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
RAUL BRUCENO  
DIRECTOR  
2700 GLADES CIRCLE, SUITE 106  
WESTON, FL, 33327

TITLE  
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CITY - ST - ZIP

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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(3)(f), 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 or without other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAUL BRUCENO

April 19, 2002

DATE

(954) 3852383

Daytime Phone #

CR2E0348 (12/01)