

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90067 004 ***158.75

DOCUMENT # P98000084502

1. Entity Name

INTER AMERICAN TRADING SERVICES, INC.

DBA/TITAN MONEY TRANSFERS

Principal Place of Business

**900 DOGWOOD DRIVE
 SUITE 337
 DELRAY BEACH FL 33483**

Mailing Address

**900 DOGWOOD DRIVE
 SUITE 337
 DELRAY BEACH FL 33483**

2. Principal Place of Business

7922 PINES BOULEVARD

3. Mailing Address

SAME

Suite, Apt. #, etc.

OFFICE - MC FRUGAL PLAZA

Suite, Apt. #, etc.

—

City & State

PEMBROKE PINES

City & State

—

Zip

33024

Country

BROWARD

Zip

—

Country

—

4. FEI Number

65-0873336

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

VALENCIA, LUIS A

**900 DOGWOOD DRIVE
 DELRAY BEACH FL 33483**

7. Name and Address of New Registered Agent

Name

LUIS A VALENCIA

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

6515 KENSINGTON LANE - APT 206

HUNTINGTON LAKES

City

DELRAY BEACH

FL

Zip Code

33446

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]
 Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/27/02

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, 2002 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	DC	<input checked="" type="checkbox"/> Delete
NAME	SALAZAR, MARCO ARBEY	
STREET ADDRESS	900 DOGWOOD DRIVE SUITE 337	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	P	<input type="checkbox"/> Delete
NAME	VALENCIA, MARUJA	
STREET ADDRESS	900 DOGWOOD DRIVE SUITE 337	
CITY-ST-ZIP	DELRAY BEACH FL 33483	
TITLE	VICE-PRESIDENT	<input type="checkbox"/> Delete
NAME	MANUEL H. TRUQUE	
STREET ADDRESS	7922 PINES BLVD - MCFRUGAL PLAZA	
CITY-ST-ZIP	PEMBROKE PINES - BROWARD - 33024	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT - TREASURER	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARUJA VALENCIA	
STREET ADDRESS	6515 KENSINGTON LANE - STE 206	
CITY-ST-ZIP	HUNTINGTON LAKES DELRAY BCH - FL 33446	
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		
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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: **MARUJA VALENCIA - PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/27/02 954-963 3339

Date

Daytime Phone #

CP2E034 (9/01)