

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000085069

1. Entity Name

TECH NET TRADING, INC.

**FILED**  
**Jan 18, 2001 8:00 am**  
**Secretary of State**

01-18-2001 90013 044 \*\*\*150.00

Principal Place of Business

100 WEST CYPRESS CREEK ROAD  
SUITE 820  
FORT LAUDERDALE FL 33309

Mailing Address

100 WEST CYPRESS CREEK ROAD  
SUITE 820  
FORT LAUDERDALE FL 33309

CU005253

2. Principal Place of Business

2700 W. CYPRESS CREEK RD.

3. Mailing Address

SAME AS

Suite, Apt. #, etc.

#A-104

Suite, Apt. #, etc.

PRINCIPAL  
PLACE OF BUS.

City & State

FT. LAUDERDALE, FL

City & State

Zip Country

Zip  
33309

Country  
USA

4. FEI Number

65-0866892

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STUART, RUBIN  
100 WEST CYPRESS CREEK ROAD  
SUITE 820  
FORT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

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  
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 D ☐ Delete  
NAME RUBIN, STUART  
STREET ADDRESS 100 WEST CYPRESS CREEK ROAD  
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE D ☐ Delete  
NAME PARKER, PATRICK T  
STREET ADDRESS 100 WEST CYPRESS CREEK ROAD  
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE D ☐ Delete  
NAME SCHWARTZ, STEVEN D  
STREET ADDRESS 100 WEST CYPRESS CREEK ROAD  
CITY-ST-ZIP FORT LAUDERDALE FL 33309

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Change ☒ Addition  
NAME MARSHALL, GREGORY  
STREET ADDRESS 12000 BISCAYNE BLVD #808  
CITY-ST-ZIP N. MIAMI, FL 33181

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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)(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 Block 12 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-08-01

Date

Daytime Phone #

0251229

CR2E034 (10/00)