

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90147 048 ***150.00

DOCUMENT # P99000005676

1. Entity Name

P + W TRADING CORP.

Principal Place of Business

Mailing Address

8457 N.W. 61ST STREET
 MIAMI FL 33166

8457 N.W. 61ST STREET
 MIAMI FL 33166-3307

A0040103



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

650889913

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PENA, PATRICIA
10234 N.W. 130TH STREET
MIAMI FL 33012

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: PD
 NAME: PENA, PATRICIA Delete
 STREET ADDRESS: 10234 N.W. 130TH STREET
 CITY-ST-ZIP: MIAMI FK L3301-2

TITLE: Change Add
 NAME: Change Add
 STREET ADDRESS: 8457 NW 61 ST. Change Add
 CITY-ST-ZIP: MIAMI, Florida 33164

TITLE: VD
 NAME: RODRIGUEZ, WILLIAM Delete
 STREET ADDRESS: 10234 N.W. 130TH STREET
 CITY-ST-ZIP: MIAMI FK L3301-2

TITLE: Change Add
 NAME: Change Add
 STREET ADDRESS: 8457 NW 61 St. Change Add
 CITY-ST-ZIP: MIAMI, Florida 33164

TITLE: Delete
 NAME: Change Add
 STREET ADDRESS: Change Add
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TITLE: Change Add
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TITLE: Change Add
 NAME: Change Add
 STREET ADDRESS: Change Add
 CITY-ST-ZIP: Change Add

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

SIGNATURE:

Patricia Pena
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/19/00 (305) 392-9933
 Date Daytime Phone #