

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**May 12, 2001 8:00 am**  
**Secretary of State**

05-12-2001 90001 033 \*\*\*150.00

**DOCUMENT # P99000028920**

1. Entity Name  
**CMS TRADING, CORP.**

Principal Place of Business  
**6385 PRESIDENTIAL COURT, SUITE 108-A  
FORT MYERS FL 33919**

Mailing Address  
**6385 PRESIDENTIAL COURT, SUITE 108-A  
FORT MYERS FL 33919**

2. Principal Place of Business  
**12455 SW 98 TER.**

3. Mailing Address  
**12455 SW 98 TER**

Suite, Apt. #, etc.  
**SUITE 408**

Suite, Apt. #, etc.  
**SUITE 408**

City & State  
**MIAMI FLORIDA**

City & State  
**MIAMI FLORIDA**

Zip  
**33186**

Country  
**USA**

Zip  
**33186**

Country  
**USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0970774**

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**MAURTUA, CARLOS  
6385 PRESIDENTIAL COURT, SUITE 108-A  
FORT MYERS FL 33919**

**7. Name and Address of New Registered Agent**

Name  
**MAURTUA CARLOS**  
Street Address (P.O. Box Number is Not Acceptable)  
**12455 SW 98 TER. SUITE 408**  
City  
**MIAMI** **FL** Zip Code  
**33186**

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 DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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  
**PTS** ☐ Delete  
NAME  
**MAURTUA, CARLOS**  
STREET ADDRESS  
**6385 PRESIDENTIAL COURT, SUITE 108-A**  
CITY-ST-ZIP  
**FORT MYERS FL 33919**

TITLE  
**D** ☐ Delete  
NAME  
**MAURTUA, CARLOS**  
STREET ADDRESS  
**6385 PRESIDENTIAL COURT, SUITE 108-A**  
CITY-ST-ZIP  
**FORT MYERS FL 33919**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE ☒ Change ☐ Addition  
NAME  
**12455 SW 98 TER. SUITE 408**  
STREET ADDRESS  
**MIAMI FL. 33186**  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
**12455 SW 98 TER SUITE 408**  
STREET ADDRESS  
**MIAMI FL. 33186**  
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)(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 lines empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/28/01** **(786) 247 4468**  
Date Daytime Phone #

CR2E034 (10/00)