DOCUMENT # P99000043355

7/7/18/00-90009-008-$150.00-$150.00

1 of 2

1. Entity Name

TRADERS DELIGHT, INC.

R

FILED

00 SEP 19 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
20930 CONCORD GREEN DRIVE EAST BOCA RATON FL 33433	20930 CONCORD GREEN DRIVE EAST BOCA RATON FL 33433

2. Principal Place of Business		3. Mailing Address	
SAME AS ABOVE		SAME AS ABOVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country USA	Zip	Country

4. FEI Number 65-0921707 ☐ Applied For ☐ Not Applicable

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
MILLER, NANCY PRES. 20930 CONCORD GREEN DRIVE EAST BOCA RATON FL 33433	Name MILLER, LESTER Street Address (P.O. Box Number is Not Acceptable) 20930 CONCORD GRN DR. E. City BOCA RATON FL Zip Code 33433

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] LESTER M. MILLER 8/3/00

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 $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00.
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 NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, NANCY 20930 CONCORD GREEN DRIVE EAST BOCA RATON FL 33433	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. MILLER, LESTER 20930 CONCORD GREEN DRIVE EAST BOCA RATON, FL. 33433	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: [signature] REQUIRED NANCY MILLER 7/11/00 561-470-3646

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

OK per andy

P99000043355

[redacted]

July 11, 2000 107514

TO WHOM IT MAY CONCERN —

TODAY I SPOKE TO THE FLORIDA DEPARTMENT OF STATE TELLING THEM THAT LAST WEEK WAS THE FIRST TIME I SAW THIS FILING REPORT. THE WOMAN SUGGEST THAT I should include A NOTE ABOUT JUST RECEIVING THIS REPORT ~~BEE~~ AND INCLUDE A CHECK for $150.00

THANKING YOU IN ADVANCE FOR your COOPERATION IN THIS MATTER.

Respectfully

Lester Miller

LESTER MILLER