## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000044096 May 01, 2000 8:00 am Secretary of State FV INTERNATIONAL TRADE, INC. 05-01-2000 90045 050 \*\*\*150.00 Principal Place of Business Mailing Address 126 NORTHEAST 1ST STREET 126 NORTHEAST 1ST STREET SHITE 173 **SUITE 173** MIAMI FL 33132-2502 MIAMI FL 33132 3. Mailing Address 2. Principal Place of Business 7161 SW 71 61 SW Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number ール Miami 65-09 20112 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired MISA 3183 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS **PSTD** PIEDRAHITA, EVELTO A TIGI SW 117 Avenue PSTD Addition TITLE TITLE Delete PIEDRAHITA, EVELIO A MAME STREET ADDRESS 126 NORTHEAST 1ST STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33132** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 fursie employered 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.