

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000069180

1. Entity Name

TRADEOLOGY.COM, INC.

**FILED**  
**May 04, 2000 8:00 am**  
**Secretary of State**

05-04-2000 90223 005 \*\*\*150.00

Principal Place of Business

4910 BLUE LAKE DRIVE, SUITE 100A  
 BOCA RATON FL 33431

Mailing Address

4910 BLUE LAKE DRIVE, SUITE 100A  
 BOCA RATON FL 33431-4416

2. Principal Place of Business

4910 Blue Lake Drive

3. Mailing Address

4910 Blue Lake Drive

Suite, Apt. #, etc.

Suite 110

Suite, Apt. #, etc.

Suite 110

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33431

Country

USA

Zip

33431

Country

USA

4. FEI Number

65-0937520

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

JYGNESH PATEL

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

4910 Blue Lake Drive

Suite 110

City

Boca Raton

FL

Zip Code

33431

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)

Jygnesh Patel

5-1-00

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

TITLE D ☐ Delete  
 NAME PATEL, JYGNESH  
 STREET ADDRESS 4910 BLUE LAKE DRIVE, SUITE 100A  
 CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ Delete  
 NAME PATEL, ALPESH  
 STREET ADDRESS 4910 BLUE LAKE DRIVE, SUITE 100A  
 CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☒ Delete  
 NAME SARAFIN, ERIC  
 STREET ADDRESS 4910 BLUE LAKE DRIVE, SUITE 100A  
 CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☒ Delete  
 NAME UNRATH, MIKE  
 STREET ADDRESS 4910 BLUE LAKE DRIVE, SUITE 100A  
 CITY-ST-ZIP BOCA RATON FL 33431

TITLE D ☐ Delete  
 NAME GESSNER, CARL A  
 STREET ADDRESS 4910 Blue Lake Dr., Suite 110  
 CITY-ST-ZIP Boca Raton, FL 33431

TITLE D ☐ Delete  
 NAME PRICE, ROBERT  
 STREET ADDRESS 4910 Blue Lake Dr. # 110  
 CITY-ST-ZIP Boca Raton, FL 33431

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME Correct suite to 110  
 STREET ADDRESS all else correct  
 CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
 NAME Correct suite to 110  
 STREET ADDRESS all else correct  
 CITY-ST-ZIP

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

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

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

TITLE D ☐ 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary Carl A. Gessner

Date

Daytime Phone #

(561) 912-0274

CR2E034 (9/99)