

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2007 8:00 am
Secretary of State

05-03-2007 90051 017 ***150.00

DOCUMENT # P99000089764

1. Entity Name
POLYTRADE INTERNATIONAL, INC.



Principal Place of Business
**3040 GATEWAY DRIVE
POMPANO BEACH, FL 33069**

Mailing Address
**3040 GATEWAY DRIVE
POMPANO BEACH, FL 33069**

40103410



DO NOT WRITE IN THIS SPACE

03272007 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3622096	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

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

6. Name and Address of Current Registered Agent

**SCHIMMEL, ROBERT L
% HESSEN, SCHIMMEL & DE CASTRO, P.A., 3191 CO
RAL WAY, PH-2
MIAMI, FL 33145**

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P BERMINGHAM, STEPHEN 3040 GATEWAY DRIVE POMPANO BEACH, FL 33069
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPST GUGLIELMI, REGINA 3040 GATEWAY DRIVE POMPANO BEACH, FL 33069
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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 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

STEPHEN M. BERMINGHAM

Date

5/1/07

Daytime Phone #

954-974-6606