2002 UNIFORM BUSINESS REPORT (UBR)

May 28, 2002 8:00 am Secretary of State DOCHMEÑT# P99000096763 C & S INTERNATIONAL TRADING OVERSEAS CORP. 05-28-2002 91723 027 ***150.00 Principal Place of Business Mailing Address 58 NE 7TH STREET 58 NE 7TH STREET **MIAMI FL 33132** MIAM1 FL 33132 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 65-0958531 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLUMENSTINE, MARC L Street Address (P.O.-Box Number is:Not Acceptable) 58 NE-7TH-STREET **MIAMI FL 33132** City Zip Code ment for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. **PSD** TITLE ☐ Delete TITLE ☐ Change ☐ Addition **BULGARIDES, CONSTANTINOS** NAME STREET ADDRESS 777 NE 62ND STREET STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33138** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **BULGARIDES, STAVROS** NAME STREET ADDRESS 777 N.E. 62ND ST., #C301 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33138 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LAGMAN, TAMMY NAME NAME STREET ADDRESS 3601 FARRAGUT ST. STREET ADDRESS CITY-ST-7IP HOLLYWOOD FL 33021 CITY-ST-ZIP TITLE Delete. TITLE Change ☐ Addition BLUMENSTINE, MARC NAME NAME STREET ADDRESS 58 NE 7TH STREET STREET ADDRESS **MIAMI FL 33132** CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition 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 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

SIGNATURE

changed, or on an attachment with an address, with all

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED