

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # S21188

(5)

95 JAN 17 AM 11:31

1. Corporation Name

INTERCEPT TRADING CORP.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **777 BAYSHORE DRIVE
APT. 1502
FT. LAUDERDALE FL 33304**

Mailing Address: **777 BAYSHORE DRIVE
APT. 1502
FT. LAUDERDALE FL 33304**

3. Date Incorporated or Qualified: **12/24/1990**
3a. Date of Last Report: **04/20/1994**

2. Principal Place of Business: **21**
2b. Mailing Address: **26**

4. FEI Number: **65-0236151**
Applied For: ☐ Not Applicable

State, Apt. #, etc.: **22**
City & State: **27**

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

City & State: **23**
City & State: **28**

6. Election Campaign Financing: ☐ **\$5.00 May Be Added to Fees**

City: **24** Country: **25** Zip: **29** Country: **30**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**DEPETRI, DOMINIC
777 BAYSHORE DR
APT 1502
FT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81. Name: _____
82. Street Address (P.O. Box Number is Not Acceptable): _____
83. _____
84. City: _____ FL 85. Zip Code: _____

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Agent-in-Charge)

(Signature of Registered Agent or Agent-in-Charge)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: D DEPETRI, DOMINIC	13.1 NAME: _____	☐ Change	☐ Addition
12.2 STREET ADDRESS: 777 BAYSHORE DRIVE	13.2 STREET ADDRESS: _____		
12.3 CITY, ST, ZIP: FT. LAUDERDALE FL	13.3 CITY, ST, ZIP: _____		
12.4 NAME: _____	13.4 NAME: _____	☐ Change	☐ Addition
12.5 STREET ADDRESS: _____	13.5 STREET ADDRESS: _____		
12.6 CITY, ST, ZIP: _____	13.6 CITY, ST, ZIP: _____		
12.7 NAME: _____	13.7 NAME: _____	☐ Change	☐ Addition
12.8 STREET ADDRESS: _____	13.8 STREET ADDRESS: _____		
12.9 CITY, ST, ZIP: _____	13.9 CITY, ST, ZIP: _____		
12.10 NAME: _____	13.10 NAME: _____	☐ Change	☐ Addition
12.11 STREET ADDRESS: _____	13.11 STREET ADDRESS: _____		
12.12 CITY, ST, ZIP: _____	13.12 CITY, ST, ZIP: _____		
12.13 NAME: _____	13.13 NAME: _____	☐ Change	☐ Addition
12.14 STREET ADDRESS: _____	13.14 STREET ADDRESS: _____		
12.15 CITY, ST, ZIP: _____	13.15 CITY, ST, ZIP: _____		

14. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 199.03(4)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 officer or business representative to whom this report is required by Chapter 199, Florida Statutes, and that my name appears in the filing of this report.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

DOMINIC DEPETRI

1/10/95 (302) 565-2111