

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State
 05-10-2001 90230 023 ***150.00

0071648

DOCUMENT # S47040

1. Entity Name

SONACO INTERNATIONAL BROKERAGE, INC.

Principal Place of Business

**7742 APPLE TREE CIRCLE
 ORLANDO FL 32819**

Mailing Address

**7742 APPLE TREE CIRCLE
 ORLANDO FL 32819**

00050428



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5900 AMERICAN WAY

Suite, Apt. #, etc.

SUITE # 100

3. Mailing Address

5900 AMERICAN WAY

Suite, Apt. #, etc.

SUITE # 100

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FL. 32

4. FEI Number

59-3076429

Applied For

Not Applicable

Zip

32819

Country

ORANGE

Zip

32819

Country

ORANGE

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**KIRAN PATEL
 7742 APPLE TREE CIR.
 ORLANDO FL 32814**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)

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, 2001 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 **DPS** ☐ Delete
 NAME **PATEL, KIRAN R.**
 STREET ADDRESS **7742 APPLE TREE CIRCLE**
 CITY-ST-ZIP **ORLANDO FL 32819**

TITLE **VPT** ☒ Delete
 NAME **PATEL, KIRAN R.**
 STREET ADDRESS **7742 APPLE TREE CIR**
 CITY-ST-ZIP **ORLANDO FL 32819**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition
 NAME **VPT**
 NAME **PATEL SONA**
 STREET ADDRESS **7742 APPLE TREE CIRCLE**
 CITY-ST-ZIP **ORLANDO, FLORIDA. 32819**

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

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

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

TITLE ☐ 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:

KIRAN PATEL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

407-313-1114

Daytime Phone #

CR2E034 (10/00)