## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## S74860 **DOCUMENT #**

1. Entity Name

MULTINATIONAL TRADING COMPANY



**FILED** Apr 15, 2003 8:00 am Secretary of State

04-15-2003 90101 041 \*\*\*150.00

,			1	S WE LO			
Principal Place of Business 2601 SOUTH BAYSHORE DRIVE SUITE 1775 MIAMI FL 33133		Mailing Address 2601 SOUTH BAYSHORE DRIVE SUITE 1775 MIAMI FL 33133		 	ii <b>18</b> 11 <b>8</b> 1811 <b>818</b> 11 81811 <b>8</b> 1	<b>1</b> 11 01011 01111 1011	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Number 65-0280541	<b>⊢</b>	Applied For Not Applicable	
Zip	Country	~ Zip .—	- Country		5. Certificate of Status Desired	~□ \$8.75 A Fee Requ	
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Re	gistered Agent	
			Nan	Name			
	, SHERRY	Street Address		et Address (	(P.O. Box Number is Not Acceptable)		
2601 SO	uth Bayshore Drive						
SUITE 1775					•		
MIAMI FL	33133		City			FL Zip Ci	ode
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							
FILE NOW!!! FEE IS \$150.00							
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00					<ol><li>9. Election Campaign Fina</li></ol>		. <b>00</b> May Be
	Payable to Florida Department of	State			Trust Fund Contribution.	☐ Add	led to Fees
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	PRS IN 11
TITLE	D	☐ Delete	TITLE			☐ Chang	e 🔲 Addition
NAME -	SAFCHIK, JEFFREY		NAME				
STREET ADDRESS	2601 S BAYSHORE SE 1775		STREET ADDRE	SS	•		}
CITY-ST-ZIP	MIAMI FL 33133		CITY-ST-ZIP	_ <b> </b>	· · · · · · · · · · · · · · · · · · ·		
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CITY-ST-ZIP	•		CITY-ST-ZIP	l l			

12. 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 exemple this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

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