

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

FILED
May 29, 2002 8:00 am
Secretary of State

05-01-2002 91612 013 ***150.00

DOCUMENT # VDL859

1. Entity Name

TRM: TEXTILE BROKERS OF FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3550 Biscayne Blvd 3. Mailing Address SAME

Suite, Apt. #: etc. #301 Suite, Apt. #: etc.

City & State MIAMI, FL City & State

Zip 33137 Country USA Zip Country

FBI Number 65-0315447 Applied For Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name BRYAN E. LEAS

Street Address (P.O. Box Number is Not Acceptable) 3550 Biscayne Blvd

#301

City MIAMI FL Zip Code 33137

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]

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

(NOTE: Registered Agent signature required when reinstating)

4/15/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
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 NAME BRYAN E. LEAS (PRES.)
STREET ADDRESS 3550 Biscayne Blvd. #301
CITY-ST-ZIP MIAMI, FL 33137

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/02 305-438-9300

Date

Daytime Phone #

CR2E034B (12/01)