2003 FOR PROFIT CORPORATION

Apr 25, 2003 8:00 am Secretary of State **UNIFORM BUSINESS REPORT (UBR)** 04-11-2003 90086 014 ***100.00 V25017 DOCUMENT # 04-25-2003 90320 007 ****50.00 1. Entity Name ALL TRADE BUSINESS FORMS, INC. Principal Place of Business Mailing Address 46008794 4371 NW 124TH AVE 4371 NW 124TH AVE CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 65-0329357 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Ш Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KTG&S REGISTERED AGENT CORPORATION Street Address (P.O. Box Number Is Not Acceptable) 1401 BRICKELL AVE SUITE 700 MIAMI FL 33131 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE Change Addition CRRE034 (10/02) ☐ Delete PIERANTONI VITTORIO FIORANI, MARIO NAME NAME 4371 NWIDYT AVE 4371 NW 124TH AVE STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** SPRINGS FL 33065 CITY-ST-7/P CITY-ST-ZIP DVS ☐ Change ☐ Addition TITLE TITLE ☐ Delete PIERANTONI, DANILO NAME NAME STREET ADDRESS 4371 NW_124TH AVE STREET ADDRESS CUTY - ST- 7/P **CORAL SPRINGS FL 33065** CITY-ST-ZIP ☐ Change ☐ Addition BILE TITLE ☐ Delete NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Chance Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Addition ☐ Delete Chance TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 bustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with per authors, with all other like empowered.



40008794 #125017

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

April 15, 2003

ALL TRADE BUSINESS FORMS, INC. 4371 NW 124TH AVE CORAL SPRINGS, FL 33065 US

Subject: ALL TRADE BUSINESS FORMS, INC.

Reference Number:___

___V25017_

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$100.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$50.00.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/mf ANNUAL REPORTS SECTION