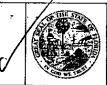
FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # √54814

INTERMARKET TRADING ADVISORS, INC.



FILED Mar 13, 2003 8:00 am Secretary of State 03-13-2003 90070 027 ***158.75

| DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address | | | | | | | 70027625 | | | |
|---|--|--|--|-----------------|---------------------|---|--------------------|---|--------------------|------------------------------------|
| Suite, Apt. #, etc. 4227 16/ST TERRICE NORTH | | | Suite, Apt. #, etc. Po Box 666990 | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State LOXAHATCHEE, FL | | | City & State Pompano, FL | | | 4. FEI Number 65 035 48 38 Applied For Not Applicab | | | | |
| Zip Country | | Country PALM Beach | Zip Co | | Country | | | ertificate of Status Desired | , ₍₁₃ , | 8.75 Additional e Required |
| | J. F. | an experience of the residence | STATE STATE OF STATE OF | | | | 7. Nan | ne and Address of Curre | | |
| | D | Name JAFFE, KAUFMAN & SARBEY, LLC | | | | | | | | |
| | No. of the contract of the con | | Street Address (P.O. Box Number is Not Acceptable) Safe 201 | | | | | | | |
| | | ACE | 3107 Stirling Rd | | | | | | | |
| mela , a series | | | | | City F | t Lau | der | -dule | FL | Zip Code 333/2 - 8504 |
| 8. The above | e named entity itions of registe | submits this statement for | the purpose of changing it | ts register | ed office or | r registere | d ager | nt, or both, in the State of F | lorida. I am fam | iliar with, and accept |
| SIGNATURE | | or printed name of egistered agent an | | | | | | | 3-1003 | |
| Jai | | y 1 Fee is \$150.00 | o me ii applicable. (NO | II E: Hegistere | d Agent signat | rae tedniled a | when reins | stating) | DATE | |
| | After May 1 Amended | Fee is \$550.00 UBR is \$61.25 Florida Department of I | State | | | | | Election Campaign F Trust Fund Contributi | · | \$5.00 May Be Added to Fees |
| 10. | - A Company of the Co | OFFICERS AND D | Section and the | 31.5 | 建心光谱 | | | | SANSANTA P | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | tiko ISHIDA # E. Pinnacle PEAK dale, AZ 85 | | 374.4 | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | 2216 | DECKER Cypress Bend Do No Beach, FL 3. | · N#108 3069 | # T. W. T. W. | 国际联系 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S - RENATO RUA CR | NISHIKAWA ETA 138 COTIA AULO, BRASIL, | ر موضوع الماريون الم | 1000 | Contact British | | | DO NOT | WRIE | |
| TITLE Hame Gtreet address City=8t=2ip | | | | 3,755% | 5 3 V | | | INTHIS | SPACI | |
| TITLE NAME | | , | | TITLE | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | ·. | 1 | T ADDRESS ST-ZIP | | | | | |
| TITLE | | | | €IIILE | | <u>artinerit</u> Karangan | u stati. Netoti | ATTOMOTION TO THE STATE OF THE | | |
| NAME STREET ADDRESS CITY-ST-ZIP | | • | | NAME STREE | T ADDRESS | | | | | |
| | ertify that the in | nformation supplied with th | is filing does not qualify for | City- | ST-ZIP | d in Soot | | | *** | |

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 attachment with an address with all other like empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an

SIGNATURE: