

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V74250

1. Entity Name

UNION TRADING INTERNATIONAL CORP.

Principal Place of Business

812 N.W. 173 TERRACE
HOLLYWOOD FL 33029

Mailing Address

812 N.W. 173 TERRACE
HOLLYWOOD FL 33029

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

MARTINEZ, PEDRO A

~~2244 NE 123 ST~~ 711 SW 113 WAY
~~N MIAMI FL 33181~~ PEMBROKE PINES, FL 33025

7. Name and Address of New Registered Agent

Name

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

711 SW 113 WAY

PEMBROKE PINES, FL

33025

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	D	<input type="checkbox"/> Delete
NAME	MARTINEZ, PEDRO A	
STREET ADDRESS	2244 NE 123 ST 711 SW 113 WAY	
CITY-ST-ZIP	N MIAMI FL 33181 PEMBROKE PINES, FL 33025	
TITLE	D	<input type="checkbox"/> Delete
NAME	MARTINEZ, CECILIA	
STREET ADDRESS	2244 NE 123 ST 711 SW 113 WAY	
CITY-ST-ZIP	N MIAMI FL 33181 PEMBROKE PINES, FL 33025	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MARTINEZ, SANDRA	
STREET ADDRESS	2244 NE 123 ST	
CITY-ST-ZIP	N MIAMI FL 33181	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARTINEZ PEDRO A.	
STREET ADDRESS	711 SW 113 WAY	
CITY-ST-ZIP	PEMBROKE PINES, FL 33025	
TITLE	MANAGER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CECILIA MARTINEZ	
STREET ADDRESS	711 SW 113 WAY	
CITY-ST-ZIP	PEMBROKE PINES, FL 33025	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

QuarTuc

PEDRO A. MARTINEZ

3/24/2001

(954) 433-3566

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

FILED
Mar 26, 2001 8:00 am
Secretary of State

03-26-2001 90042 011 ***150.00



DO NOT WRITE IN THIS SPACE