2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P96000035660 1. Entity Namie 1:							ı				
ISLAND TRADING HOLDINGS, INC.						FILED					
						00 SEP 12 PM 3: 30					
Principal Place of Business Mailing Address 1330 OCEAN DRIVE, 4TH FLOOR 1330 OCEAN DRIVE, 4TH FLO				SECRETARY OF STATE					<u>.</u>		
MIAMI BEACH		MIAMI BEACH FL 33139				TALLAHASSEE FLORIDA					
·											
2. Principal Pl	ace of Business	3. Mailing Address							ENTERNA O		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					DO NOT WRIT	E IN THIS SP	ACE		
City & State		City & State			4	4. FE	Number 65-067166	3		plied For t Applicable	
Zip	Country	Zip	Cour	ntry		5. Ce	ertificate of Status Desired		B.75 Add e Required		
	6. Name and Address of Current I	Registered Agent	•		7	7. Na	me and Address of New Re	gistered Ag	ent		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE EL 20201 2525					Name						
					Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE FL 32301-2525											
					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 with							stating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. FILE NOW!!! FEE After SEPTEMBER 13, 2000						0	10. Election Campaign Fina Trust Fund Contribution			May Be	
(See criter	ia on back)	Make Check Payat	ole to D	epartment							
11.	DVP OFFICERS AND		12.	Т		ADD	ITIONS/CHANGES TO OFFI			S IN 11 Addition	
TITLE NAME	MESTEL, LAWWRENCE W	Delete	NAN	- 1	•				_ •	/	
STREET ADDRESS	825 8 AVENUE, 24TH FLOOR			EET ADDRESS (-ST-ZIP		٠	9000034 -09/26/	ԳՍՔԵ ՊՈՈԿ	129- 190	9	
CITY-ST-ZIP TITLE	NEW YORK NY DP	☐ Delete	TITL				****75	0.00 e	000 C	O. U. ition	
NAME	HART, SUSAN W	Delete	NAM	1				•	onungo =		
STREET ADDRESS CITY-ST-ZIP	1330 OCEAN DRIVE, 4TH FLOO	R		EET ADDRESS (-ST-ZIP							
TITLE	MIAMI BEACH FL VP	Delete	TITL					Г	☐ Change	Maddition Addition	
NAME	FORSTER, JOHN	Delete	NAM	1							
STREET ADDRESS	825 EIGHT AVENUE 24TH FLOO)R		EET ADORESS							
CITY-ST-ZIP TITLE	NEW YORK NY ST	☐ Delete	TITL	r-ST-ZIP				Г	Change	Addition	
NAME	FREIDMAN, MEG	☐ Delete	NAN	- 1					_ Changs		
STREET ADDRESS	825 EIGHT AVENUE 24TH FLOO	R		EET ADDRESS							
CITY-ST-ZIP TITLE	NEW YORK NY	☐ Delete	TITL	r-ST-ZIP				<u>.</u>	Change	Addition	
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NAME		in Delete	NAM	IE							
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS '-ST-ZIP	,				KE		
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 frue 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 employered 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 employered.											
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF SIGNATU											
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