2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State
04-27-2001 90356 031 ***158.75

DOCUMENT # 393644

1. Entity Name
ECONOCARIBE CONSOLIDATORS, INC.

Principal Place of Business
2401 N W 69TH ST
MIAMI FL 33147

Mailing Address
2401 N W 69TH ST
MIAMI FL 33147

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1428228 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent
LESNIK, GERALD
2401 NW 69TH ST.
MIAMI FL 33147

7. Name and Address of New Registered Agent
Name: MITCHELL SHAPIRO
Street Address (P.O. Box Number is Not Acceptable): 2401 NW 69th ST
City: MIAMI FL Zip Code: 33147

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 _____ 1/25/01
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PD NAME: LESNIK, GERALD STREET ADDRESS: 2401 N.W. 69TH ST. CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: PRESIDENT NAME: JOHN ADISCH STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition
TITLE: VPSD NAME: LESNIK, GARY STREET ADDRESS: 2401 NW 69TH ST CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: CHIEF FINANCIAL OFFICER NAME: MITCHELL SHAPIRO STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition
TITLE: VPD NAME: OFFEN, EMANUEL STREET ADDRESS: 2401 N W 69TH ST CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: VPD NAME: BRAD BRODER STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition
TITLE: TD NAME: LESNIK, JIL STREET ADDRESS: 2401 N W 69TH ST CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: VPD NAME: ROBERT GOLDENBERG STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition
TITLE: D NAME: LESNIK, CAROL STREET ADDRESS: 2401 N W 69TH ST CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: VPD NAME: RONALD OLSTER STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition
TITLE: D NAME: LESNIK, HOPE STREET ADDRESS: 2401 N W 69TH ST CITY-ST-ZIP: MIAMI FL 33147	☒ Delete	TITLE: VPD NAME: JESUS BERMUDEZ STREET ADDRESS: 2401 NW 69th ST CITY-ST-ZIP: MIAMI, FL 33147	☐ Change ☑ Addition

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: _____ 1/25/01 305 693 5133
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)