

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # M43404**

1. Entity Name

ANDROS GROUP INCORPORATED**FILED****Jan 24, 2000 8:00 am**
Secretary of State

01-24-2000 90010 004 ***150.00

Principal Place of Business

**1330 CORAL WAY
STE 103
MIAMI FL 33145
US**

Mailing Address

**1330 CORAL WAY
STE 103
MIAMI FL 33145-2933
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2797356

Applied For

Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**SARPOOLAKI, ZOY T
503 RIVERSIDE DR
MELBOURNE BEACH FL 32951**

7. Name and Address of New Registered Agent

Name

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

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
PD	TINIACOS, DEMETRIO	1330 CORAL WAY #103	MIAMI FL	☐
V	TINIACOS, EFSTRATIA C DE	1330 CORAL WAY #103	MIAMI FL	☐
S	TINIACOS, ALEJANDRO	1330 CORAL WAY #103	MIAMI FL	☐
T	SARPOOLAKI, ZOY T	503 RIVERSIDE DR	MELBOURNE BEACH FL 32951	☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan. 16, 2000