

2000 UNIFORM BUSINESS REPORT (UBR)

0032442

DOCUMENT # N97000004319

1. Entity Name

MIAMI INTERNATIONAL BUSINESS PARK MAINTENANCE AS ✓

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

00 APR 26 AM 9:28

Principal Place of Business
2300 CORAL WAY
SUITE 200
MIAMI FL 33145

Mailing Address
2300 CORAL WAY
SUITE 200
MIAMI FL 33145-3511



DO NOT WRITE IN THIS SPACE

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

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

4. FEI Number **65-0788268**
Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES, INC.
2300 CORAL WAY
MIAMI FL 33145

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

Amada Cantera Lopez

AMADA CANTERA LOPEZ, PRES.

4/24/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	LOPEZ-CANTERA, CARLOS	
STREET ADDRESS	7415 NW 7TH STREET	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	D	<input type="checkbox"/> Delete
NAME	KATSIKOS, LEE	
STREET ADDRESS	7415 NW 7TH STREET	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	D	<input type="checkbox"/> Delete
NAME	LARREA, LINDA	
STREET ADDRESS	7415 NW 7TH STREET	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE	STV	<input type="checkbox"/> Delete
NAME	LOPEZ-CANTERA, MONICA	
STREET ADDRESS	7415 NW 7TH STREET	
CITY-ST-ZIP	MIAMI FL 33126	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	000003237070--2	
STREET ADDRESS	-05/03/00--01075--003	
CITY-ST-ZIP	*****61.25 *****61.25	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	000003237070--2	
STREET ADDRESS	-05/03/00--01075--004	
CITY-ST-ZIP	*****8.75 *****8.75	
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		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Amada Cantera Lopez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CARLOS LOPEZ-CANTERA, DIR. PRES.

Date Daytime Phone #

4/24/00

CR2E037 (9/99)