

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91218 049 ***150.00

DOCUMENT # **P00000047464**

1. Entity Name

MR. DOT LORD.

Principal Place of Business

14050 Biscayne blvd. apt 617
North Miami, FL 33181

Mailing Address

2131 Calais DR
Miami Beach FL 33141

A0064754

2. Principal Place of Business

14050 Biscayne blvd.
 Suite, Apt. #, etc.
apt. 617

3. Mailing Address

14050 Biscayne blvd.
 Suite, Apt. #, etc.
apt. 617

DO NOT WRITE IN THIS SPACE

City & State

North Miami, FL

City & State

North Miami, FL

4. FEI Number

65-1009519

Applied For

Not Applicable

Zip

33181

Country

US

Zip

33181

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WERMUTH, J. MICHAEL
2131 Calais DR
Miami Beach FL 33141

7. Name and Address of New Registered Agent

Name
WERMUTH, J. MICHAEL
 Street Address (P.O. Box Number is Not Acceptable)
2300 NW 53 STREET STE 30P
 City
Miami **FL** Zip Code
33166

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	Maharaj, Shiva	2131 Calais DR	Miami Beach FL 33141	<input type="checkbox"/>
D	Conesa, Raymond	2131 Calais DR	Miami Beach FL 33141	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
D	Maharaj, Shiva	2131 Calais DR 14050 Biscayne blvd.	Miami Beach apt. 617 North Miami, FL 33181	<input type="checkbox"/>	<input type="checkbox"/>
D	Conesa, Raymond	14050 Biscayne blvd. apt. 617	North Miami, FL 33181	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

Raymond Conesa
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/2001 **(305) 401-4691**
 Date Daytime Phone #

CR2E034 (11/00)