


112

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT 23 PM 4:02

DOCUMENT # *P02000106973*

1. Entity Name
INTEAR CORP.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6039 COLLINS AVE #1404

3. Mailing Address
6039 COLLINS AVE #1404

Suite, Apt. #, etc.

REINSTATEMENT *03*
DO NOT WRITE IN THIS SPACE

City & State
MIAMI BEACH FL

City & State
MIAMI BEACH FL

Zip
33141

Country
U.S.A

4. FEI Number
20-0317449

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
DONATO DANIEL ROBERTO

Street Address (P.O. Box Number is Not Acceptable)
6039 COLLINS AVE #1404

City
MIAMI BEACH

FL

Zip Code
33141

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE <i>PRESIDENT</i>	NAME <i>DONATO, DANIEL R</i>	STREET ADDRESS <i>6039 COLLINS AVE #1404</i>	CITY-ST-ZIP <i>MIAMI BEACH FL 33141</i>
TITLE <i>VICE PRESIDENT</i>	NAME <i>GENTILE, GIUSEPPE</i>	STREET ADDRESS <i>6039 COLLINS AVE #1404</i>	CITY-ST-ZIP <i>MIAMI BEACH FL 33141</i>
TITLE <i>TREASURER</i>	NAME <i>FRANCO, DANIEL A</i>	STREET ADDRESS <i>6039 COLLINS AVE #1404</i>	CITY-ST-ZIP <i>MIAMI BEACH</i>
TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	
TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	
TITLE NAME	STREET ADDRESS	CITY-ST-ZIP	

TITLE
NAME

STREET ADDRESS
000024054470

CITY-ST-ZIP
*10/23/03--01078--002 **150.00*

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

TITLE
NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE
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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 10/21/03 (305) 866-8433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

214

Tuesday, October 21, 2003

**Division of Corporation
Uniform Business Report Filings**

**From: INTEAR CORP.
P020000106973**


Through this I want to notify that the papers for Uniform Business report never been send to me.

I went to an Accounting Office and they let me Know the amount to be pay for the company and also the reports.

I apology for the inconvenient then here I am sending my payments for the year of 2003.

Any question contact me (305) 866-8433.

Sincerely,


Daniel R Donato
President