2002 Uniform Business Report (UBR)

changed, or on an attachment with an address, with all other life

SIGNATURE:

e empowered.

Mar 27, 2002 8:00 am § Secretary of State P96000049899 DOCUMENT # 1. Entity Name 03-27-2002 90061 024 ***150 00 ECLECTIQUE, INC. Principal Place of Business Mailing Address 8991 S.W. 85TH STREET. 8991 S.W. 85TH STREET MIAMI FL 33173 MIAMI FL 33173 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0682266 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent International Registered Agents Corporation CABEZA, MANUEL E ESQ. Street Address (P.O. Box Number is Not Acceptable) 800 DOUGLAS ROAD 338 Minorca Avenue **SUITE 351** CORAL GABLES FL 33134 Zip Code Coral Gables 33134 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. Maria Elena Cabeza, President <u>March 13, 2002</u> Signature, typed or printed name of registered agent and title if applicable. required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME DENOUX, BERNADETTE NAME 8260 S.W. 103RD ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33156 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition CARRENO, GILBERT NAME NAME STREET ADDRESS 8260 S.W. 103RD ST. STREET ADDRESS CITY-ST-7iP MIAMI FL 33156 CITY-ST-ZIP TITLE Delete TITLE Change 1 ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED

ATTACHMENT

March 13, 2002

Division of Corporations Uniform Business Report Filings Post Office Box 1500 Tallahassee, Florida 32302-1500

RE:

Our File Number.:

1154-02-MEC

Corporation:

ECLECTIQUE. INC

Document Number.: P96000049899

Dear Sir or Madam:

Enclosed is the 2002 Uniform Business Report of the above-reference corporation along with a check in the amount of \$150.00 to cover the filing fee for the annual report.

If you have any questions regarding this filing, please call our office.

Sincerely,

Maria Elena Cabeza

Mecaly

Paralegal

Enclosures