

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90117 029 ***158.75

DOCUMENT # P97000058558

1. Entity Name

SEGUI FINANCIAL SERVICES, CORP.

Principal Place of Business

Mailing Address

8454 N.W. 8TH STREET, #8
 MIAMI FL 33126

8454 N.W. 8TH STREET, #8
 MIAMI FL 33126-3745

2. Principal Place of Business

3. Mailing Address

10860 SW 34 STREET

10860 SW 34 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

MIAMI FLA 33165

City & State

MIAMI FLA

4. FEI Number

65-0769901

Applied For

Not Applicable

Zip

33165

Country

USA/DADE

Zip

33165

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SEGUI, WILFREDO
 8454 N.W. 8TH STREET
 #8
 MIAMI FL 33126

Name

WILFREDO SEGUI

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

10860 SW 34 STREET

City

MIAMI

FL

Zip Code

33165

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

Wilfredo Segui

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PT	<input type="checkbox"/> Delete
NAME	SEGUI, WILFREDO	
STREET ADDRESS	8454 N.W. 8TH STREET, #8 10860 SW 34 STREET	
CITY-ST-ZIP	MIAMI FL 33126 MIAMI FLA 33165	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SEGUI, IRIS	
STREET ADDRESS	8454 N.W. 8TH STREET, #8 10860 SW 34 STREET	
CITY-ST-ZIP	MIAMI FL 33126 MIAMI FLA 33165	
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wilfredo Segui
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4/10/2000

DAYTIME PHONE #

(305) 222-4295

CR2E034 (9/99)