

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000077404

1. Entity Name

EIGHTH FLOOR SERVICES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90026 034 ***150.00

Principal Place of Business

3191 CORAL WAY, SUITE 800
 MIAMI FL 33145

Mailing Address

3191 CORAL WAY, SUITE 800
 MIAMI FL 33145-3218

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0612215

Applied For
 Not Applicable

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

BODILL JOSE C
 3191 CORAL WAY
 SUITE 800
 MIAMI FL 33145

Bofill, Jose C.

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

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, 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 PD
 NAME BOFILL, JOSE C
 STREET ADDRESS 3191 CORAL WAY, SUITE 800
 CITY-ST-ZIP MIAMI FL 33145 ☐ Delete

TITLE VD
 NAME VILAR, PATRICK
 STREET ADDRESS 3191 CORAL WAY, STE 800
 CITY-ST-ZIP MIAMI FL 33145 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE SD
 NAME VELIZ, ANA
 STREET ADDRESS 3191 CORAL Way, Suite 800
 CITY-ST-ZIP MIAMI, FL 33145 ☐ Change ☒ Addition

TITLE TD
 NAME Rottino, Michael
 STREET ADDRESS 3191 CORAL Way, Suite 800
 CITY-ST-ZIP MIAMI, FL 33145 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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:

Jose C. Bofill Jose C. Bofill

4/26/00 305-443-0200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #