

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 28, 2000 08:00 AM**
Secretary of State**DOCUMENT # 513020**

1. Entity Name

EXECUCENTRE INTERNATIONAL, INC.

Principal Place of Business

9574 HARDING AVE

SURFSIDE
33154

FL

Mailing Address

9574 HARDING AVE

SURFSIDE
33154

FL

2. Principal Place of Business

9940 COLLINS AVENUE

3. Mailing Address

9940 COLLINS AVENUE

Suite, Apt. #, etc.

#10

Suite, Apt. #, etc.

#10

City & State

BAL HARBOUR

FL

City & State

BAL HARBOUR

FL

Zip
33154

Country

Zip
33154

Country

4. FEI Number

59-1696246

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentEVANCO CAROL
9574 HARDING AVESURFSIDE
33154

US

FL

7. Name and Address of New Registered Agent

Name

EVANCO CAROL

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

9940 COLLINS AVENUE

#10

City
BAL HARBOUR

FL

Zip Code
33154

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)

04/28/2000

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE D ☐ Delete
NAME STEPHENS ROBERT
STREET ADDRESS 1939 W FLOWER
CITY-ST-ZIP PHOENIX ARTITLE PST ☐ Delete
NAME EVANCO CAROL
STREET ADDRESS 9940 COLLINS AVE
CITY-ST-ZIP BAL HARBOUR FLTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE D ☒ Change ☐ Addition
NAME STEPHENS ROBERT
STREET ADDRESS 1939 W FLOWER
CITY-ST-ZIP PHOENIX AR 85015TITLE PST ☒ Change ☐ Addition
NAME EVANCO CAROL
STREET ADDRESS 9940 COLLINS AVE
CITY-ST-ZIP BAL HARBOUR FL 33154TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ 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: Carol Evanco

Pres: 04/28/2000