

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90063 047 ***150.00

DOCUMENT # 593175 ✓
1. Entity Name
EXECUCENTRE, INC.

DO NOT WRITE IN THIS SPACE

B0093704

2. Principal Place of Business
7001 SW 61 AVE
Suite, Apt. #, etc.
City & State
MIAMI FLORIDA
Zip
33143 Country
U.S.A.

3. Mailing Address
P.O. Box 432050
Suite, Apt. #, etc.
City & State
MIAMI FLORIDA
Zip
33243 Country
U.S.A.

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2504385 Applied For
☐ Not Applicable

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

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
MURPHY, LINDA
Street Address (P.O. Box Number is Not Acceptable)
7001 SW 61 AVE.
City
MIAMI FL Zip Code
33143

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 Linda F. Murphy DATE 4-25-02
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒
January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$850.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MURPHY, LINDA F. 7001 SW 61 AVE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ESTEVEZ, MICHAEL 7001 SW 61 AVE MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BARBEILA, NICHOLAN 7001 SW 61 AVE MIAMI, FL 33143
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Linda F. Murphy Date 4/30/02 Daytime Phone # (305) 266-5920
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)