

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A94000000040

1. Entity Name  
FINANTEX, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 FEB 14 AM 11:25

Principal Place of Business  
153 SEVILLA AVENUE  
CORAL GABLES FL 33134

Mailing Address  
P.O. BOX 140668  
CORAL GABLES FL 33114-0668



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
MJF REGISTERED AGENT CORP.  
153 SEVILLA AVENUE  
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

9. Capital Contributions as Shown on record. \$11,000.00  
10. Amount of Capital Contributions in FLORIDA to date.  
11. MAKE CHECK PAYABLE TO DEPT. OF STATE SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	NAME	STREET ADDRESS	CITY - ST - ZIP
P93000087565	FINANTEX U.S.A., INC.	153 SEVILLA AVENUE	CORAL GABLES FL 33134
F94000000050	FINANTEX CORP.	4 COLUMBUS CENTER, WICKHAMS CAY, ROAD TOWN	TORTOLA, BR. VIRGIN ISLANDS

13. ADDRESS CHANGES ONLY

STREET ADDRESS	CITY - ST - ZIP
100003151221--2	-02/29/00--01031--019
****174.50	****174.50
uf 2/23/00	

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: SIGNATURE REQUIRED 2/10/00 305-442-1567  
MICHAEL J. GREENMAN, DIRECTOR, FINANTEX, U.S.A., INC. Date Daytime Phone #

00039713 A1

CR2E003 (9/99)

A94000000040

Law Offices

**MICHAEL J. FREEMAN, P.A.**

**153 Sevilla Avenue**

**Coral Gables, Florida 33134-6088**

Reply to:  
P.O. Box 140668  
Coral Gables, Florida 33114-0668

Tel: (305) 442-1567  
Fax: (305) 442-1227

February 10, 2000  
Secretary of State  
Division of Corporations  
Annual Report Section  
P.O. Box #1500  
Tallahassee, Florida 32302-1500

Re: **FINANTEX, LTD**  
Document #A94000000040

Gentlemen:

Enclosed for filing, please find the following documents for this corporation:

1. Executed 2000 Uniform Business Report;
2. Trust Account check # 11567 in the amount of \$174.50 representing the filing fee in the amount of \$165.75 and \$8.75 for a Certificate of Status.

Please send the Certificate of Status to me at the address above.

Thank you for your courtesies in this matter.

Very truly yours,



MICHAEL J. FREEMAN

MJF:lc  
enc.