

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F63962

1. Entity Name

INTERNATIONAL PURCHASING GROUP INC.

FILED
Mar 29, 2000 8:00 am
Secretary of State

03-29-2000 90045 016 ***158.75

Principal Place of Business

2250 NW 96 AVENUE
MIAMI FL 33172
US

Mailing Address

2250 NW 96 AVENUE
MIAMI FL 33172-2327
US

2. Principal Place of Business

9801 SW 110 Street

Suite, Apt. #, etc.

3. Mailing Address

PO BOX 165931

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

MIAMI, FL 33116-5931

4. FEI Number

59-2166796

Applied For

Not Applicable

Zip

33176

Country

USA

Zip

33116-5931

Country

USA

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

6. Name and Address of Current Registered Agent

RODRIGUEZ, JOSE A
9801 SW 110 STREET
MIAMI FL 33176

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PST
RODRIGUEZ, JOSE A
9801 SW 110 STREET
MIAMI FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE A. RODRIGUEZ, PRESIDENT

3/21/00

Date

(305) 271-6351

Daytime Phone #

CR2E034 (9/99)