

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F78072

1. Entity Name

CHEMPART, INC.

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90111 030 ***150.00

Principal Place of Business

10820 SW 144 PLACE
 MIAMI FL 33186

Mailing Address

10820 SW 144 PLACE
 1550 MADRUGA AVE/SUITE 120
 MIAMI FL 33186-6617
 US

2. Principal Place of Business

5901 S.W. 74 ST
 SUITE # 403

3. Mailing Address

12062 S.W. 117 CT
 Suite, Apt. #, etc.
 PMB 103

City & State

MIAMI, FLA 33143

City & State

MIAMI, FLA 33186

4. FEI Number

59-2236405

Applied For

Not Applicable

Zip

33143

Country

DADE

Zip

33186

Country

DADE

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PALMER, ALFRED R
 1500 MONZA AVE #200
 CORAL GABLES FL 33146

7. Name and Address of New Registered Agent

Name -- MANHEIM, ALFRED

Street Address (P.O. Box Number is Not Acceptable)
 5901 S.W. 74 ST.

SUITE 403

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

[Signature] *Alfred R. Palmer*

28 April 2000

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 PD ☐ Delete
 NAME GUMMELS, PIETER H.
 STREET ADDRESS 1550 MADRUGA AVE #120
 CITY-ST-ZIP CORAL GABLES FL

TITLE STD ☐ Delete
 NAME GUMMELS, WILLIAM A.
 STREET ADDRESS 1550 MADRUGA AVE #120
 CITY-ST-ZIP CORAL GABLES FL

TITLE VD ☐ Delete
 NAME GUMMELS, HENK
 STREET ADDRESS 1550 MADRUGA AVE #120
 CITY-ST-ZIP CORAL GABLES FL

TITLE ED ☐ Delete
 NAME BRANDON, BRIAN M.
 STREET ADDRESS 1550 MADRUGA AVE #120
 CITY-ST-ZIP CORAL GABLES FL

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
 NAME
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TITLE ☐ 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

[Signature] *BRIAN M. BRANDON* 4-28-00 (305) 937-9483

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)