

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2001 8:00 am
Secretary of State

09-14-2001 90003 006 ***550.00

DOCUMENT # F95000002547

1. Entity Name

EXPORT AND BUSINESS SERVICES INC.

Principal Place of Business

**13701 N KENDALL DR
 306
 MIAMI FL 33186
 US**

Mailing Address

**13701 N KENDALL DR
 306
 MIAMI FL 33186
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0566545

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**FERNANDEZ, MARIA L
 13621 S.W. 109 ST.
 MIAMI FL 33186**

7. Name and Address of New Registered Agent

Name

David Boon

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

10110 E. Calusa Club Drive

City

Miami

FL

Zip Code

33186

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

David Boon

9/4/01

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 \$550.00
 After September 12, 2001 Fee will be \$750.00
 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

**PC
 FERNANDEZ, MARIA L
 13621 S.W. 109 ST.
 MIAMI FL 33186**

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**SD
 BARROS, PEDRO A
 13621 S.W. 109 ST.
 MIAMI FL 33186**

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**D
 BOON, DAVID
 16117 WHITE OAKS DR.
 LAKE OSWEGO OR 97035**

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**T/D
 Fernandez, Maria L
 14001 SW 100 Ave
 Miami, FL 33176**

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**P/D
 Barros, Pedro A
 14001 SW 100 Ave.
 Miami, FL 33176**

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**VP/C
 Boon, David
 10110 E. Calusa Club Drive
 Miami, FL 33186**

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**S/D
 Boon, Susan
 10110 E. Calusa Club Drive
 Miami, FL 33186**

☐ Change

☒ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/4/01

Date

(305) 382-2112

Daytime Phone #

CR2E034 (5/01)

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002547

1. Entity Name

EXPORT AND BUSINESS SERVICES INC.

Principal Place of Business

13621 SW 109 ST
MIAMI FL 33186
US

Mailing Address

13621 SW 109 ST
MIAMI FL 33186
US

2. Principal Place of Business

13701 N. Kendall Dr.

3. Mailing Address

13701 N. Kendall Dr.

Suite, Apt. #, etc.

Ste 306

Suite, Apt. #, etc.

Ste 306

City & State

Miami, FL

City & State

Miami, FL

Zip

33186

Country

USA

Zip

33186

Country

USA

4. FEI Number

65-0566545

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ, MARIA L
13621 S.W. 109 ST.
MIAMI FL 33186

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

Maria Luisa Fernandez

09/05/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	PC	<input type="checkbox"/> Delete
NAME	FERNANDEZ, MARIA L	
STREET ADDRESS	13621 S.W. 109 ST.	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BARROS, PEDRO A	
STREET ADDRESS	13621 S.W. 109 ST.	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOON, DAVID	
STREET ADDRESS	16117 WHITE OAKS DR.	
CITY-ST-ZIP	LAKE OSWEGO OR 97035	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Fernandez, Maria L.	
STREET ADDRESS	13621 SW 109th St.	
CITY-ST-ZIP	Miami, FL 33186	
TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barros, Pedro A.	
STREET ADDRESS	13621 SW 109th St.	
CITY-ST-ZIP	Miami, FL 33186	
TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Boon, David	
STREET ADDRESS	10110 E. Calusa Club Dr.	
CITY-ST-ZIP	Miami, FL 33186	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Boon, Susan	
STREET ADDRESS	10110 E. Calusa Club Dr.	
CITY-ST-ZIP	Miami, FL 33186	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 file 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, for all other like empowered.

(305) 382-2112

Maria Luisa Fernandez Director 09/05/00

Attachment
Changes will not
get made in
2000. Please be
sure all new
changes are made
for 2001.
DO NOT WRITE IN THIS SPACE