

600 UNIFORM BUSINESS REPORT (UBR)

6/19/

FILED
Jul 07, 2000 8:00 am
Secretary of State

06-19-2000 90003 040 ***150.00

DOCUMENT # F96000006236

1. Entity Name
SELECT AGENCIES N.V.

Principal Place of Business Mailing Address
 % SANDRA R. DE MARCHENA % SANDRA R. DE MARCHENA
 7126 SW 48 LANE 7126 SW 48 LANE
 MIAMI FL 33155 MIAMI FL 33155-5603

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Zip Country Country

4. FEI Number **98-0070956** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
DE MARCHENA, SANDRA R
7126 SW 48 LANE
MIAMI FL 33155

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 _____
Signature, typed or printed name of registered agent and title if applicable.

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	CP	<input type="checkbox"/> Delete
NAME	DELVALLE, EUNICE	
STREET ADDRESS	DOORMANWEL 51	
CITY-ST-ZIP	CURACA NE	
TITLE	C	<input type="checkbox"/> Delete
NAME	DE MARCHENA, ARMANDO	
STREET ADDRESS	PASSAATSTRAAT 8	
CITY-ST-ZIP	CURACAO, NETH. ANTILLES	
TITLE	M	<input type="checkbox"/> Delete
NAME	MARCHENA, SANDRA R	
STREET ADDRESS	7126 48 LN	
CITY-ST-ZIP	MIAMI FL 33155	
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		<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		
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		
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 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: Sandra R. de Marchena SANDRA R. de MARCHENA 6/13/2000 205-663-0006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

166 (6) (30) (19/99)

Joe # F96000006236

ND6546

SANDRA R. DE MARCHENA

June 26, 2000

Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Subject: Select Agencies, N/V.

Reference Number: F96000006236

Dear Sir or Madam:

We have been instructed by your offices at telephone # 850-487-6059, #2 to resubmit the original letter explaining the tardiness of our remittal of the filing fee for the annual report of the above referenced foreign corporation.

We would appreciate your consideration for abatement of the \$400.00 late fee as the document was lost in the mail and was not received at the mailing address until the date of payment on June 13th, 2000.

Looking forward to your favorable reply, we remain,

Most cordially yours,


Sandra R. de Marchena
Attorney-in-Fact

Encl: Copy Letter dated June 13, 2000
Copy of your letter dated June 19, 2000
Copy of 2000 Uniform Business Report (UBR)

Doc # F96 00000623

106646

Select Agencies, N.V.
c/o Sandra R. de Marchena
7126 SW 48 Lane
Miami, FL 33155-5603

June 13, 2000
In reply to: Select Agencies, N.V.

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir Or Madam:

Enclosed please find a check for \$150.00 and our annual report, which we have just received.

Apparently it had been lost in the mail and we therefore respectfully request that you accept our payment at this time. Please consider that Select Agencies is a foreign corporation with no office in the U.S., and we many times receive their mail late.

Most cordially yours,



~~Sandra R. de Marchena~~
Attorney-in-Fact