

## 2001 UNIFORM BUSINESS REPORT (UBR)

0214865

DOCUMENT # F98000000411

1. Entity Name

PHARMED INTERNATIONAL CORP.

FILED

01 JAN 31 AM 9:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

3075 N.W. 107TH AVENUE  
MIAMI FL 33172

Mailing Address

3075 N.W. 107TH AVENUE  
MIAMI FL 33172

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number 65-0717190

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SANCHEZ, CHARLES J  
3075 N.W. 107TH AVENUE  
MIAMI FL 33172

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, 2001 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution. ☐\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME DE CESPEDES, JORGE L  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE TCFO ☐ Delete  
NAME PEREZ, BERTIN J  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE VD ☒ Delete  
NAME LAZARO, ALEX  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE CEOC ☐ Delete  
NAME DE CESPEDES, CARLOS M  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE ASD ☐ Delete  
NAME SANCHEZ, CHARLES J  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE SCD ☐ Delete  
NAME GARCIA, LEO  
STREET ADDRESS 3075 N.W. 107TH AVENUE  
CITY-ST-ZIP MIAMI FL 33172TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000003656760--0  
CITY-ST-ZIP -02/08/01--01004--025  
\*\*\*\*150.00 \*\*\*\*150.00TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ Addition  
NAME V.P. LEONARDO ARTEAGA  
STREET ADDRESS 3075 N.W. 107 Ave  
CITY-ST-ZIP Miami - FL 33172TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)