

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 629418

1. Entity Name
Pharmed Group Corp.

FILED

01 JAN 31 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
3075 N.W. 107th Avenue
Miami, FL 33172

Mailing Address
Same

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

59-2279655

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Charles J. Sanchez
3075 N.W. 107th Ave.
Miami, FL 33172

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, 2001 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	<input type="checkbox"/> Delete
NAME	Jorge L. de Cespedes	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	Carlos M. de Cespedes	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	
TITLE	SCO	<input type="checkbox"/> Delete
NAME	Wm. A. Baldwin	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	
TITLE	VASD	<input type="checkbox"/> Delete
NAME	Charles J. Sanchez	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	Bertini Perez	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	
TITLE	VP	<input type="checkbox"/> Delete
NAME	Leo Garcia	
STREET ADDRESS	3075 N.W. 107 Ave	
CITY-ST-ZIP	Miami, FL 33172	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	200003656752-5	
STREET ADDRESS	-02/08/01--01004--022	
CITY-ST-ZIP	****150.00 ****150.00	
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: Charles J. Sanchez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan. 31, 2001
Date

(305) 592-2324
Daytime Phone #

CR2E034 (11/00)