

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90398 033 ***150.00

DOCUMENT # G39157

1. Entity Name
NISTAL INTERNATIONAL INC.

Principal Place of Business

**8249 N. W. 36TH STREET
SUITE 118 119
MIAMI FL 33166-6613
US**

Mailing Address

**P. O. BOX 52-0577
MIAMI FL 33152-0577
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8249 N.W. 36th. STREET

3. Mailing Address

Suite, Apt. #, etc. **119**

City & State **MIAMI, FL**

City & State

4. FEI Number **59-2291284**

Applied For

Not Applicable

Zip **33166-6673**

Country **U.S.A.**

Zip

Country

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

6. Name and Address of Current Registered Agent

**NISTAL, VALMY R
8249 N.W. 36TH STREET
SUITE 118 119
MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name **NISTAL, VALMY R.**

Street Address (P.O. Box Number is Not Acceptable)
8249 N.W. 36th. STREET

SUITE 119

City **MIAMI**

FL

Zip Code **33166**

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 *Valmy R. Nistal* 04/12/02

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, 2002 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 **NISTAL, VALMY**
STREET ADDRESS **8249 N.W. 36TH STREET, SUITE 118 119**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **STD** ☐ Delete
NAME **NISTAL, FELIPE**
STREET ADDRESS **8249 N.W. 36TH STREET, SUITE 118 119**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **VPD** ☐ Delete
NAME **NISTAL, SALVADOR**
STREET ADDRESS **8249 N.W. 36TH STREET, SUITE 118 119**
CITY-ST-ZIP **MIAMI FL 33166**

TITLE **VPD** ☐ Delete
NAME **NISTAL, SALVADOR JR.**
STREET ADDRESS **8249 N.W. 36TH STREET, SUITE 118 119**
CITY-ST-ZIP **MIAMI FL 33166**

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
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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: *Valmy R. Nistal* Valmy R. Nistal
President

04/12/02 (305) 594-6517

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)