2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **H32598** Mar 28, 2000 8:00 am 1. Entity Name **Secretary of State** MIA FIA ENTERPRISE, INC. 03-28-2000 90060 025 ***150.00 Principal Place of Business Mailing Address 2826 EAST OAKLAND PARK BLVD 2826 EAST OAKLAND PARK BLVD SUITE 200 FT. LAUDERDALE FL 33306-1814 FT. LAUDERDALE FL 33306 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied:For 59-2536885 Not Applicable Country Zip Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SASADU. CHESTER J. JR. Street Address (P.O. Box Number is Not Acceptable) 2826 E. OAKLAND PARK BLVD STE-200 FT. LAUDERDALE FL 33306 Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY-1, 2000 Fee will be \$550.00-Tax filing requirement and elects to do so Trust Fund.Contribution. (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. PTD Addition TITLE ☐ Change TITLE □ Delete FORTIER, THERESA NAME NAME 5550 N.E. 33RD AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT LAUDERDALE FL CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE FORTIER, JACQUELINE FORTIER-SINAS, JACQUELIN NAME 11701 TERRA BELLA BLYD 3055 HARBOR DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL PLANTATION ACRES FL Addition ☐ Delete TITLE FORTIER, JOHN NAME NAME STREET ADDRESS 5550 NE 33RD AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP. CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME 🗬 STREET ADDRESS emption s of a Coction 119.07(3)(i), Florida Statutes. I further certify that the information influer shall have the same legal effect as if made under oath; that I am an officer or director quited by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information supplied with this filing does not qualify for the indicated on this report or supplemental report is true and accurate and of the corporation or the receiver or trustee empowered to execute this