

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2001 8:00 am
Secretary of State
 02-16-2001 90027 012 ***150.00

0151206

DOCUMENT # H72899

1. Entity Name

THE INDIA LETICIA CORPORATION

Principal Place of Business 201 S. Biscayne Blvd. Suite 850 Miami, Fl 33131	Mailing Address 201 S. Biscayne Blvd. Suite 850 Miami, Fl. 33131
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2. Principal Place of Business 201 S. Biscayne Blvd.	3. Mailing Address 201 S. Biscayne Blvd.
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Suite, Apt. #, etc. Suite 850	Suite, Apt. #, etc. Suite 850
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City & State Miami, Fl 33131	City & State Miami, Fl 33131
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Zip 33131	Country USA	Zip 33131	Country USA
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6. Name and Address of Current Registered Agent

ROSSZ FIU CORPORATION
 201 S. Biscayne Blvd.
 Suite 850
 Miami, Fl 33131

7. Name and Address of New Registered Agent

Name
Rossz-Fiu Corporation
 Street Address (P.O. Box Number is Not Acceptable)
 201 S. Biscayne Blvd. Suite 850
 City Miami, FL Zip Code 33131

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 *Jan Carson Cheezem* **Jan Carson Cheezem, President** **02/13/01**
Signature, typed or printed name of registered agent and title (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 NAME STREET ADDRESS CITY-ST-ZIP	PD CHEEZEM, CHARLES K 201 S. Biscayne Blvd. Suite 850 Miami, Fl 33131 <input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHEEZEM, JAN CARSON 201 S. Biscayne Blvd. Suite 850 Miami, Fl 33131 <input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Cheezem, Charles K. 201 S. Biscayne Blvd. Suite 850 Miami, Fl 33131 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Cheezem, Jan Carson 201 S. Biscayne Blvd. Suite 850 Miami, Fl 33131 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *Jan Carson Cheezem* **02/09/01** **305 702 3004**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)