

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J87271

1. Entity Name
JAPONICA INTERNATIONAL, INC.

FILED
00 AUG 10 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
200 SOUTH BISCAYNE BLVD
SUITE 4000
MIAMI FL 33131-2398
US

Mailing Address
C/O C.A. ROSS
3845 S.W. 41ST STREET
PEMBROKE PINES FL 33023
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

200 South Biscayne Blvd.

Suite, Apt. #, etc.
Suite 4000

Suite, Apt. #, etc.

City & State

City & State
Miami, Florida

4. FEI Number 59-2836014

Applied For
Not Applicable

Zip

Country

Zip
33131-2398

Country
USA

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

CRAIG, BARRY G ESQ.
200 S. BISCAYNE BOULEVARD
SUITE 4000
MIAMI FL 33131

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
STVD
CARDENAS, MONICA
2121 S.W. THIRD AVENUE., #5
MIAMI FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD/P/T
CARDENAS, MONICA
2121 SW Third Avenue, #5
Miami, FL ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
CARDENAS, MONICA
2121 S.W. THIRD AVENUE #5
MIAMI FL 33129 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CRAIG, BARRY G.
200 S. Biscayne Blvd, Ste. 4000
Miami, FL 33131-2398 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 REQUIRED
Barry G. Craig, Secretary

Date

Daytime Phone #

8-8-00 305-822-7036

SP

CR2E034 (5/00)