

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90002 041 ***150.00

DOCUMENT # K22810

1. Entity Name

TRANSDVIDEO CORP.

Principal Place of Business

% NURIA S. MALLA
 10458 N. W. 31 TERRACE
 MIAMI FL 33172

Mailing Address

% NURIA S. MALLA
 10458 N. W. 31 TERRACE
 MIAMI FL 33172

2. Principal Place of Business

10462 N.W. 31st TERR. Suite, Apt. #, etc.

3. Mailing Address

10462 N.W. 31st TERR. Suite, Apt. #, etc.

City & State

MIAMI, FL.

City & State

MIAMI, FL.

4. FEI Number

65-0047600

Applied For

Not Applicable

Zip

33172

Country

U.S.A.

Zip

33172

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MALLA, NURIA S
 10458 N.W. 31 TERRACE
 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, 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 ☐ Delete
 NAME D ROBLES, MARIO A.
 STREET ADDRESS 10458 NW 31 TER
 CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
 NAME PO NURIA MALLA
 STREET ADDRESS 10458 N.W. 31ST TERRACE
 CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02/06/02 (305) 594-3000

CR2E034 (9/01)

Attachment
Document #
K22810
823660

Department of State
P.O. Box 1500
Tallahassee, Fl. 32302-1500

February 01, 2002

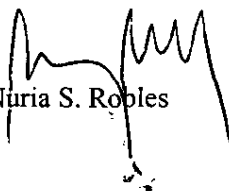
To whom it may concern:

Re: Transvideo, Corp.
FEI #65-0047600

Please take note of my new mailing and place of business address:

10462 N.W. 31st Terr.
Miami, Fl. 33172

Sincerely yours,


Nuria S. Roples