

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90221 038 \*\*\*150.00

0620367

**DOCUMENT # K75283**

1. Entity Name  
**ANSAL CORPORATION**

Principal Place of Business C/O. INTERNATIONAL REAL ESTATE ENT. 13000 S.W. 120TH ST. MIAMI FL 33186 US	Mailing Address C/O INTERNATIONAL REAL ESTATE ENT. INC. 13000 S.W. 120TH STREET MIAMI FL 33186 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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4. FEI Number **65-0116793** Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
**IT'L REAL ESTATE C/O IVANKA FROYO**  
**13000 SW 120ST**  
**SUITE 125**  
**MIAMI FL 33186**

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 \_\_\_\_\_ (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		<input type="checkbox"/> Delete
TITLE	<b>PDT</b>	<input type="checkbox"/> Delete
NAME	<b>PINZANI, ANTONIO</b>	
STREET ADDRESS	<b>13000 S W 120TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL 33186</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> Delete
NAME	<b>PINZANI, ELVA</b>	
STREET ADDRESS	<b>13000 S W 120TH STREET</b>	
CITY-ST-ZIP	<b>MIAMI FL 33186</b>	
TITLE	<b>VPD</b>	<input type="checkbox"/> Delete
NAME	<b>PINZANI, MANUELLA</b>	
STREET ADDRESS	<b>13000 SW 120 ST</b>	
CITY-ST-ZIP	<b>MIAMI FL 33186</b>	
TITLE	<b>VPD</b>	<input type="checkbox"/> Delete
NAME	<b>PINZANI, ANTONELLA</b>	
STREET ADDRESS	<b>13000 SW 120TH ST</b>	
CITY-ST-ZIP	<b>MIAMI FL 33186</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> 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: *Antonio Pinzani* **ANTONIO PINZANI** Date 4-20-01 Daytime Phone # 305 232 1032

CR2E034 (10/00)