

2001 UNIFORM BUSINESS REPORT (UBR)

0000648 AF

DOCUMENT # L00000009215

1. Entity Name

M&T INTERNATIONAL SERVICES, L.L.C.

FILED

01 APR 16 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

536 BILTMORE WAY
CORAL GABLES FL 33134

Mailing Address

536 BILTMORE WAY
CORAL GABLES FL 33134

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1028744

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CUEVAS, ANDREW
536 BILTMORE WAY
CUEVAS & RUBIN, P.A.
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

ANDREW CUEVAS, ESQ.

Street Address (P.O. Box Number is Not Acceptable)

536 BILTMORE WAY

City

CORAL GABLES

FL

Zip Code

33134

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

Andrew Cuevas

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

500004078845--2

-04/25/01--01123--001

*****50.00 ~~250.00~~

9. MANAGING MEMBERS / MEMBERS

TITLE NAME LINO FRANCISCO MENDOZA ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE NAME MGRM LINO FRANCISCO MENDOZA ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP 536 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

TITLE NAME MGR ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP FERNANDO MENDOZA
536 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

TITLE NAME MGR ☒ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP MAUREEN HEGGIE DE MENDOZA
536 BILTMORE WAY
CORAL GABLES, FLORIDA 33134

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS
CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

Andrew Cuevas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

4/12/01

Daytime Phone #

CR2E083 (11/00)