

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 24, 2001 08:00 AM**
Secretary of State**DOCUMENT # L11173**1. Entity Name
ROMELL INTERNATIONAL CORPORATION

Principal Place of Business

4150 NW 7TH ST #245

MIAMI
33126

FL

US

Mailing Address

7670 SW 82 ST.

H214

MIAMI
33143

FL

US

2. Principal Place of Business

7670 S.W. 82 STREET

Suite, Apt. #, etc.
H214

City & State

MIAMI

FL

Zip

33143

Country

US

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0139355

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FLOREZ MARIA EUGENIA
7670 SW 82 STMIAMI
33143

FL

US

7. Name and Address of New Registered Agent

Name

FLOREZ MARIA EUGENIA

Street Address (P.O. Box Number is Not Acceptable)
7670 SW 82 ST

H214

City
MIAMI

FL

Zip Code
33143

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 **CARLOS ALBERTO JARAMILLO**

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

(NOTE: Registered Agent signature required when reinstating)

01/24/2001

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 P
NAME FLOREZ MARIA EUGENIA ☐ Delete
STREET ADDRESS 7670 S.W. 82 STREET, #H-214
CITY-ST-ZIP MIAMI FL 33143TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition
NAME JARAMILLO CARLOS APRESIDE
STREET ADDRESS 7670 S.W. 82 STREET, #H-214
CITY-ST-ZIP MIAMI FL 33143TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: **CARLOS ALBERTO JARAMILLO**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

P

01/24/2001

Date

Daytime Phone #

CR2E034 (11/00)