

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 26, 2000 8:00 am**  
**Secretary of State**

04-26-2000 90413 001 \*\*\*150.00  
 04-26-2000 90413 002 \*\*\*\*\*8.75

**DOCUMENT # L75646**

1. Entity Name  
**ATLANTIC PACIFIC IMPORT-EXPORT, INC.**  
**ATLANTIC PACIFIC IMP & EXP.**

Principal Place of Business <b>2550 N.W. 72ND AVENUE</b> <b>SUITE 100</b> <b>MIAMI FL 33122</b>	Mailing Address <b>2550 N.W. 72ND AVENUE</b> <b>SUITE 100</b> <b>MIAMI FL 33181-3100</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>2001 Atlantic Shores Blvd</b> Suite, Apt. #, etc. <b>B-8 # 315</b>		3. Mailing Address <b>2001 Atlantic Shores Blvd</b> Suite, Apt. #, etc. <b>B-8 # 315</b>	
City & State <b>Hallandale Fl. 33009</b>		City & State <b>Hallandale Fl.</b>	
Zip <b>33009</b>	Country <b>U.S.A.</b>	Zip <b>33009</b>	Country <b>USA</b>

4. FEI Number <b>65-0196507</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent <b>ROOSEVELT, TEDDY</b> <b>2550 N.W. 72ND AVENUE, STE. 100</b> <b>MIAMI FL 33122</b>	7. Name and Address of New Registered Agent Name <b>ROOSEVELT, TEDDY</b> Street Address (P.O. Box Number is Not Acceptable) <b>2001 Atlantic Shores Blvd</b> <b>B-8 # 315</b> City <b>HALLANDALE</b> <b>FL</b> Zip Code <b>33009</b>
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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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVT ROOSEVELT, TEDDY 2550 N.W. 72ND AVENUE, SUITE 100 MIAMI FL 33122 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVT ROOSEVELT TEDDY 2001 Atlantic Shores Blvd B-8 #315 HALLANDALE FL 33009 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROOSEVELT, TEDDY 2550 N.W. 72ND AVENUE, SUITE 100 MIAMI FL 33122 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ROOSEVELT, TEDDY 2001 ATLANTIC SHORES BLVD B-8 # 315 HALLANDALE FL 33009 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: TEDDY ROOSEVELT **04/14/00 (954) 455 9732**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)