2001 UNIFORM BUSINESS REPORT (UBR)

(-
DOCU 1. Entity Nam	MENT# L990	000007976			CII		Ļ
AMPHION ENTERPRISES, LLC						ED	
					01 FEB -5	PM 2: 13	•
Principal Plac	ce of Business	Mailing Address					•
9400 SOUTH DADELAND BLVD SUITE 508 MIAMI FL 33156		9400 SOUTH DADELAND BLVD SUITE 508 MIAMI FL 33156			TALLAHASS	Y OF STATE BE.FLORIDA	
2. Principal Place of Business		3. Mailing Address			1 520 11 2 11 010 1010 1 0111 0 0	/// 	BIBI 18818 BIBI 1881
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			DO NOT V	WRITE IN THIS SPACE	
City & State	te	City & State		4. Fi	El Number APPLIEU	100929)	Applied For Not Applicable
Zip	Country	Zip	Country	5. C	ertificate of Status Desire	\$5.00	Additional
- 	6. Name and Address of Curro	ent Registered Agent	-	7. N	ame and Address of Ne		лінец ————————————————————————————————————
			Name	JAM.	sel J. U	EDROS	
STINSON, LOUIS JR. 4675 PONCE DE LEON BOULEVARD, SUITE 305 CORAL GABLES FL 33146		,	Street		x Number is Not Accept	able) Blue	el.
		UITE 305	56	56.40	508	,	
CORAL G	ADDLOTE SOLIO	1	- City	Wind son	*	FL 🕸	Code - C
	named entity submits this statemen	i to the second of the second of the	societored office	or registered age	nt, or both, in the State o		
 The above 	named entity submits this statemen	nt for the purpose of changing its	s registered office (n tečisioion ade			
8. The above	a named entity submits this statemen	/	<u> </u>		9	ارزا	
8. The above	Signature, typed or printed name of registered a	2 Jam	SEC J. E: Registered Agent signs	VEDRO	9	IZO OL	
/) Yansklind	Jam gent and title if applicable. (NOT	SEC J. E: Registered Agent signs OW!!! FEE IS	VED Ro ature required when rein \$50.00	stating)	ارزا	,
/	Signature, typed or priets aname of registered as	gent and title if applicable. (NOT	SEC J. E: Registered Agent signs OW!!! FEE IS	VED Ro ature required when rein \$50.00	sstating)	DATE DATE	,
SIGNATURE	Signature, typed or pricted name of registered at	igent and title if applicable. (NOT	SEC J. E: Registered Agent sign OW!!! FEE IS ayable to Depar	VED Ro ature required when rein \$50.00	sstating)	DATE OL	ge 🔲 Addition
SIGNATURE 9. TITLE NAME	Signature, typed or pricted name of registered at MANAGING ME MGRM VEDROS, JAMSEL J	gent and title if applicable. (NOT FILE N Make Check Pa EMBERS/MEMBERS Delete	SEC J. E: Hegistered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS	VED Ro ature required when rein \$50.00	sstating)	DATE DATE	, , , , , , , , , , , , , , , , , , ,
SIGNATURE .	Signature, typed or pricted name of registered at	Igent and title if applicable. (NOT FILE N Make Check Pa	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VED Ro ature required when rein \$50.00	sstating)	DNS/CHANGES	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM	gent and title if applicable. (NOT FILE N Make Check Pa EMBERS/MEMBERS Delete	SEC J. E: Hegistered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS	VED Ro ature required when rein \$50.00	e ADDITIC	DNS/CHANGES Chang	ge
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR.	Gent and title if applicable. (NOT FILE N Make Check Pa EMBERS/MEMBERS Delete Delete Delete	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VED Ro ature required when rein \$50.00	e ADDITIO	DNS/CHANGES Change	ge 🗆 Addition
9. TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete VD., SUITE 508 Delete D., SUITE 305	CE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	VED Ro ature required when rein \$50.00	ADDITIO	DATE DATE DATE DATE DATE DATE DATE DATE	ge □ Addition 2 6 008 ***50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Gent and title if applicable. (NOT FILE N Make Check Pa EMBERS/MEMBERS Delete Delete Do., SUITE 508	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE	VED Ro ature required when rein \$50.00	ADDITIO	DNS/CHANGES Change Change Change Change Change Change	ge □ Addition 2 15 008 ***50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete VD., SUITE 508 Delete D., SUITE 305	CE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	VED Ro ature required when rein \$50.00	ADDITIO	DATE DATE DATE DATE DATE DATE DATE DATE	ge □ Addition 2 6 008 ***50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete VD., SUITE 508 Delete D., SUITE 305	TE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VED Ro ature required when rein \$50.00	ADDITIO	DATE DATE DATE DATE DATE DATE DATE DATE	ge □ Addition 2 6 008 ***50.00
B.	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete VD., SUITE 508 Delete D., SUITE 305	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VED Ro ature required when rein \$50.00	ADDITIO	DATE DATE DATE DATE DATE DATE DATE DATE	ge ☐ Addition -2 — 15 5—008 :¥*50.00 ge ☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Igent and title if applicable. (NOT) FILE N Make Check Pa EMBERS/MEMBERS Delete Delete D., SUITE 305	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VEDRO sture required when rein \$50.00 tment of State	ADDITIO	DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes Changes	ge ☐ Addition -2 — 15 5—008 :¥*50.00 ge ☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Igent and title if applicable. (NOT) FILE N Make Check Pa EMBERS/MEMBERS Delete Delete D., SUITE 305	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	VEDRO sture required when rein \$50.00 tment of State	ADDITIO	DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes Changes	ge ☐ Addition -2 — 15 5—008 :¥*50.00 ge ☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	Igent and title if applicable. (NOT) FILE N Make Check Pa EMBERS/MEMBERS Delete Delete D., SUITE 305	SEC J. E: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	VEDRO sture required when rein \$50.00 tment of State	ADDITIO	DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	FILE N Make Check Pa MBERS/MEMBERS Delete Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	VEDRO ature required when rein \$50.00 tment of State	ADDITIO	DNS/CHANGES Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE	FILE N Make Check Pa MBERS/MEMBERS Delete Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VEDRO ature required when rein \$50.00 tment of State	ADDITIO	DNS/CHANGES Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAML FL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVC CORAL GABLES FL 33143	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VEDRO ature required when rein \$50.00 tment of State	ADDITIO	DNS/CHANGES Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE CORAL GABLES FL 33143	FILE N Make Check Pa MBERS/MEMBERS Delete Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depar 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	VEDRO ature required when rein \$50.00 tment of State	ADDITIO	DATE DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE CORAL GABLES FL 33143	Gent and title if applicable. (NOT FILE N Make Check Pa MBERS/MEMBERS Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VEDRO ature required when rein \$50.00 tment of State	ADDITIO	DATE DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes	ge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING ME MGRM VEDROS, JAMSEL J 9400 SOUTH DADELAND BLV MIAMLEL 33156 MGRM STINSON, LOUIS JR. 4675 PONCE DE LEON BLVE CORAL GABLES FL 33143	Gent and title if applicable. (NOT FILE N Make Check Pa EMBERS/MEMBERS Delete Delete Delete Delete Delete	TE: Registered Agent signs OW!!! FEE IS ayable to Depai 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	VEDRO ature required when rein \$50.00 tment of State	ADDITION ADD	DATE DATE DATE DATE DATE Changes Changes Changes Changes Changes Changes	ge Addition - 08 - 08 - 4 Addition ge Addition ge Addition