

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M31489

1. Entity Name

MIXNI DYNAMIC TRADE, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90048 024 ***150.00

Principal Place of Business

Mailing Address

2355 SALCEDO STREET
300
CORAL GABLES FL 33114
US

4545 N.W. 7TH STREET
12
CORAL GABLES FL 33126-2352
US

2. Principal Place of Business

3. Mailing Address

9450 Sunset Drive

Suite, Apt. #, etc.

Suite 106

City & State

City & State

Miami, Fl.

Zip
33173

Country

USA

Zip

Country

4. FEI Number

59-2669692

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IZQUIERDO, NICOLAS
2660 S W 37TH AVENUE #700
MIAMI FL 33133

Name

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

7901 N. Kendall Drive

City
Miami

FL

Zip Code

33156

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

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

(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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PST
IZQUIERDO, NICOLAS
2355 SALCEDO, #300
CORAL GABLES FL 33134 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
7901 N. Kendall Drive
Miami, Fl. 33156 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
V
IZQUIERDO, JUAN CARLOS
2660 SW 37 AVE., #700
MIAMI FL 33133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
7901 N. Kendall Drive
Miami, Fl. 33156 ☒ Change ☐ Addition

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NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nicolas Izquierdo
President

3-28-00 (305) 598-8007

Date

Daytime Phone #

CR2E034 (9/99)