

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000005135

1. Entity Name

BIZNET EXCHANGE, INC.

FILED
Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90004 023 ****61.25

Principal Place of Business

7667 WEST SAMPLE ROAD #265
POMPANO BEACH FL 33065
US

Mailing Address

7667 WEST SAMPLE ROAD #265
POMPANO BEACH FL 33065
US

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

65-0696687

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

BEHREN, SCOTT M ESQ.
1221 BRICKELL AVENUE
SUITE 1780
MIAMI FL 33131

Name Richard Tobier

Street Address (P.O. Box Number is Not Acceptable)
4584 N. Hiatus Rd

City Sunrise

FL

Zip Code
33351

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME MEDINA, HECTOR
STREET ADDRESS 2871 N.W. 92ND AVENUE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE PD ☒ Change ☐ Addition
NAME Tobier, Richard
STREET ADDRESS 4584 N. Hiatus Rd
CITY-ST-ZIP Sunrise, FL 33351

TITLE TD ☐ Delete
NAME MEANS, LAURENCE R
STREET ADDRESS 7667 WEST SAMPLE ROAD #265
CITY-ST-ZIP POMPANO BEACH FL 33065

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

TITLE SD ☐ Delete
NAME ASHFORD, JANET
STREET ADDRESS 8197 NW 6 ST
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE SD ☒ Change ☐ Addition
NAME McClellan, Suzanne
STREET ADDRESS 2500 N. Military Trail, Suite 465
CITY-ST-ZIP Boca Raton, FL 33431

TITLE VD ☐ Delete
NAME COMEN, FRED
STREET ADDRESS 3469 NW 55 ST
CITY-ST-ZIP FT LAUDERDALE FL 33309

TITLE VD ☒ Change ☐ Addition
NAME Shnider, Ronald
STREET ADDRESS 1333 S. University Dr, Suite 201
CITY-ST-ZIP Plantation, FL 33324

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Laurence R. Means
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-27-01 (954) 796-8779

CR2E037 (10/00)