

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000018420

1. Entity Name

SHARNET, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90112 008 ***150.00

Principal Place of Business

16825 SW 82ND CT.
MIAMI FL 33157

Mailing Address

16825 SW 82ND CT.
MIAMI FL 33157

2. Principal Place of Business

11511 S.W. 145th AVE

Suite, Apt. #, etc.

3. Mailing Address

11511 S.W. 145th AVE

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

Applied For

☒ Not Applicable

Zip

33186

Country

Zip

33186

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VITI, ALFREDO
16825 SW 82ND CT.
MIAMI FL 33157

7. Name and Address of New Registered Agent

Name

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

11511 S.W. 145th AVENUE

City

MIAMI

FL

Zip Code

33186

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, 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 D ☐ Delete
NAME ARCONTE, ANTONIO S
STREET ADDRESS 16825 SW 82ND CT.
CITY-ST-ZIP MIAMI FL 33157

TITLE D ☐ Delete
NAME CANCEDDA, PIER F
STREET ADDRESS 16825 SW 82ND CT.
CITY-ST-ZIP MIAMI FL 33157

TITLE D ☐ Delete
NAME VITI, ALFREDO V
STREET ADDRESS 16825 SW 82ND CT.
CITY-ST-ZIP MIAMI FL 33157

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11511 SW 145 AVE.
CITY-ST-ZIP MIAMI FL 33186

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 11511 SW 145 AVE
CITY-ST-ZIP MIAMI FL 33186

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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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:

Alfredo Viti - ALFREDO VITI

4/20/01

305 591 7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)