

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 91071 038 ***150.00

DOCUMENT # P00000023001

1. Entity Name

INTERNAL ACTIVE SYSTEMS, INC.

INTEREST 3
 NOTIFY SENT
 : INTERNAL A
 8906 CITRUS
 TAMPA FL 33

Principal Place of Business

14802 N. FLORIDA AVE., SUITE D57
 TAMPA FL 33613

Mailing Address

14802 N. FLORIDA AVE., SUITE D57
 TAMPA FL 33613



A0069263

2. Principal Place of Business

8906 Citrus Village
 Suite, Apt. #, etc.
Apt 107

3. Mailing Address

8906 Citrus Village
 Suite, Apt. #, etc.
Apt 107



DO NOT WRITE IN THIS SPACE

City & State
Tampa FL 33626

City & State
Tampa FL 33626

4. FEI Number
59-3638123

Applied For
 Not Applicable

Zip
33626 Country
Hillsborough

Zip
33626 Country
Hillsborough

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

FLORIDA INCORPORATORS, INC.
1221 BRICKELL AVE., SUITE 900
MIAMI FL 33131

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☐ Delete
 NAME **Ricardo CEREDA**
 STREET ADDRESS **8906 Citrus Village Dr Apt 107**
 CITY-ST-ZIP **Tampa FL 33626**

TITLE **President** ☒ Change ☐ Addition
 NAME **Ricardo Antonio CEREDA**
 STREET ADDRESS **8906 Citrus Village Dr Apt 107**
 CITY-ST-ZIP **Tampa FL 33626**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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 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 register of 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

Ricardo Antonio CEREDA

4/28/2001
 Date

813 335-1596
 Daytime Phone #

CR2E034 (10/00)