

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90953 023 ***158.75

DOCUMENT # P00000024371

1. Entity Name

LATINODE COMMUNICATIONS CORPORATION

Principal Place of Business

**7232 N.W. 31ST ST.
 MIAMI FL 33122**

Mailing Address

**7232 N.W. 31ST ST.
 MIAMI FL 33122**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0999026

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GORMAN, LENARD H
 2655 LE JEUNE RD. PENTHOUSE I-D
 CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

Name **GLORIA VASQUEZ**

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

7232 NW 31 STREET

City **MIAMI**

FL

Zip Code **33122**

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]

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

(NOTE: Registered Agent signature required when reinstating)

4/26/01

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 **GORMAN, LENARD H**
 STREET ADDRESS **2655 LE JEUNE RD., PENTHOUSE I-D**
 CITY-ST-ZIP **CORAL GABLES FL 33134**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Change ☒ Addition
 NAME **JORGE GRANADOS**
 STREET ADDRESS **7232 NW 31 ST**
 CITY-ST-ZIP **MIAMI - FL 33122**

TITLE **VRE PRESIDENT** ☐ Change ☒ Addition
 NAME **OLIVIA DE LA SALAS**
 STREET ADDRESS **7232 NW 31 ST**
 CITY-ST-ZIP **MIAMI - FL 33122**

TITLE **SECRETARY** ☐ Change ☒ Addition
 NAME **GLORIA VASQUEZ**
 STREET ADDRESS **7232 NW 31 ST**
 CITY-ST-ZIP **MIAMI FL 33122**

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

TITLE ☐ Change ☐ Addition
 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:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/01

305-542-2971

CR2E034 (10/00)