2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000024910 1. Entity Name BAIL-OUT, INC. Principal Place of Business Mailing Address 324A SOUTHWEST 12TH AVENUE 324A SOUTHWEST 12TH AVENUE MIAMI FL 33130 MIAMI FL 33130 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 4 City & State City & State Zip Country Country Zip 5. 6. Name and Address of Current Registered Agent Name CUBILLOS, FERNANDO L Street Address (P.O 324A SOUTHWEST 12TH AVENUE MIAMI FL 33130 City 8. The above named entity submits this statement for the purpose of changing its registered office or registered SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required who FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Tax flling requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. 11. TITLE TITLE Delete CUBILLOS, FERNANDO L NAME NAME STREET ADDRESS STREET ADDRESS 324A SOUTHWEST 12TH AVENUE CITY-ST-ZIP MIAMI FL 33130 CITY-ST-ZIP ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-2IP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TTRE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

4/2:

FILED May 18, 2001 8:00 am

	•		State	a
04-25-2001 90	0122	050 **	*158.75	
DO NOT WRITE IN TH	IS SPA	ACE		
. FEI Number		A	oplied For	
65-099019-	5		of Applicable	
. Certificate of Status Desired	Fe	3.75 Add a Require	ditional d	
Name and Address of New Registers	d Age	ent		
. Box Number is Not Acceptable)				
F	L	Zip Coo	le	
agent, or both, in the State of Florida.			· · · · · · · · · · · · · · · · · · ·	1
				١
n reinstating) OA7	Έ	·	 .	
10. Election Campaign Financing Trust Fund Contribution.		\$5.0 Adde	00 May Be	
10. Election Campaign Financing		Adde	d to Fees	
10. Election Campaign Financing Trust Fund Contribution.		Adde	d to Fees	(004 /10/00)
10. Election Campaign Financing Trust Fund Contribution.		Adde	d to Fees	000004 (40,004)
10. Election Campaign Financing Trust Fund Contribution.		Adde	d to Fees SS IN 11 Addition Addition	CDSC02 (10/00)
10. Election Campaign Financing Trust Fund Contribution.		Adde IRECTOF Change Change	d to Fees SS IN 11 Addition Addition	CDSC004 (10,004)
10. Election Campaign Financing Trust Fund Contribution.		Adde IRECTOF Change Change	d to Fees SS IN 11 Addition Addition	ODSCON /10/00/
10. Election Campaign Financing Trust Fund Contribution.		Adde IRECTOF Change Change Change	d to Fees SS IN 11 Addition Addition Addition	A00001 (10000)

13. I hereby certify that the information supplied with this filling 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:

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR