

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000024917

1. Entity Name

TCI INTERNATIONAL INC.

Principal Place of Business

7345 SAND LAKE ROAD STE 204
ORLANDO FL 32819

Mailing Address

7345 SAND LAKE ROAD STE 204
ORLANDO FL 32819

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

59-3495773

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

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. ☐

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 **PRESIDENT** ☒ Delete

NAME **SANDRA DE CASSIA RODRIGUES**

STREET ADDRESS **3217 HARPERS FERRY CT**

CITY-ST-ZIP **ORLANDO - FL - 32837**

TITLE **PRESIDENT** ☐ Delete

NAME **JOSE CARLOS M. PINTO**

STREET ADDRESS **14352 COLONIAL GRAND BLVD #2508**

CITY-ST-ZIP **ORLANDO, FL - 32837**

TITLE **SECRETARY** ☐ Delete

NAME **JOSE CARLOS M. PINTO**

STREET ADDRESS **14352 COLONIAL GRAND BLVD #2508**

CITY-ST-ZIP **ORLANDO - FL - 32837**

TITLE **TREASURER** ☐ Delete

NAME **JOSE CARLOS M. PINTO**

STREET ADDRESS **14352 COLONIAL GRAND BLVD #2508**

CITY-ST-ZIP **ORLANDO - FL - 32837**

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

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSE CARLOS M. PINTO
PRESIDENT

Date

Daytime Phone #

04/26/01

407-765-5689

CR2E034 (10/00)

0011022

FILED
May 07, 2001 8:00 am
Secretary of State

05-07-2001 90046 004 ***150.00



DO NOT WRITE IN THIS SPACE