

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91573 002 ***158.75

DOCUMENT # P00000025970

1. Entity Name

Mondiale Group Inc.

Principal Place of Business

Mailing Address

1075 SW 67 ave
 Miami FL 33144

1075 SW 67 ave.
 Miami FL 33144

2. Principal Place of Business

1075 sw67 ave

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33144

Country

USA

3. Mailing Address

1075 sw 67 ave.

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33144

Country

USA

4. FEI Number

65 0999524

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Efren Castellanos
 2104 Sw 93 ct Miami FL

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

E. Castellanos

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 NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

PRESIDENT
 EFREN CASTELLANOS
 2104 SW 93 CT
 MIAMI FL 33165

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

VICE PRESIDENT
 EFREN CASTELLANOS
 2104 SW 93 CT
 MIAMI FL 33165

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

SECRETARY
 EFREN CASTELLANOS
 2104 SW 93 CT
 MIAMI FL 33165

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

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:

E. Castellanos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4.16.01 305.269.7057

CR2E034 (11/00)