

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000034405

1. Entity Name  
IGO BRANDS, INC.

**FILED**  
**Aug 01, 2002 8:00 am**  
**Secretary of State**

08-01-2002 90163 050 \*\*\*150.00

UBR02 AV

Principal Place of Business  
1470 N.E. 125 TERRACE #710  
NORTH MIAMI FL 33161

Mailing Address  
1470 N.E. 125 TERRACE #710  
NORTH MIAMI FL 33161



DO NOT WRITE IN THIS SPACE

|   |         |                     |         |  |  |                               |  |
|---|---------|---------------------|---------|--|--|-------------------------------|--|
| 2. Principal Place of Business  |         | 3. Mailing Address  |         | 4. FEI Number<br><b>65-0996645</b>   |  | Applied For<br>Not Applicable |  |
| Suite, Apt. #, etc.   |         | Suite, Apt. #, etc. |         | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |                               |  |
| City & State  |         | City & State        |         |  |  |                               |  |
| Zip   | Country | Zip                 | Country |  |  |                               |  |
| 6. Name and Address of Current Registered Agent                         |         |                     |         | 7. Name and Address of New Registered Agent  |  |                               |  |
| FERNANDEZ, JUAN F<br>1470 N.E. 125 TERRACE #710<br>NORTH MIAMI FL 33161 |         |                     |         | 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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PSTD<br>FERNANDEZ, JUAN F<br>1470 N.E. 125 TERRACE #710<br>NORTH MIAMI FL 33161 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> 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: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

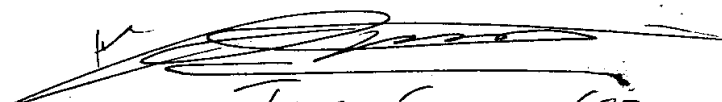
Entitled

Attachment # P00000034405  
123251

Juan fernanadez (IGO BRANDS INC)

07/21/2002

THIS IS A NOTE: TO INFORM YOU, THAT THE FIRST REPORT WAS LOST IN  
THE MAIL, AND NEVER WAS RESIVED  
IN THE SAM IAM ENCLOSING THE ANUAL FEE OF 150.00 SNKS FOR YOU COP  
ERATION .JUAN FERNANDEZ

  
Juan Fernandez.

FEI # 65-0956645  
Document # P00000034405