

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2001 8:00 am
Secretary of State
 05-19-2001 90282 028 ***150.00

DOCUMENT # P00000043700

1. Entity Name

ANOTHER GROUP INC.

Principal Place of Business

4129 NW 135th Street
 Miami, FL 33054

Mailing Address

4129 NW 135th Street
 Miami, FL 33054

2. Principal Place of Business

4139 NW 135th Street

3. Mailing Address

4139 NW 135th Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEJ Number

85-1003349

Applied For

Not Applicable

Zip

33054

Country

Zip

33054

Country

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

768496

6. Name and Address of Current Registered Agent

MARTINEZ, MANUEL ANTONIO
 4129 NW 135th Street
 Miami FL 33054

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.
 (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 ☐ Delete
 D MARTINEZ, MANUEL ANTONIO
 STREET ADDRESS 4129 NW 135th Street
 CITY-ST-ZIP Miami FL 33054

TITLE NAME ☐ Delete
 D COUJI, WAL MANUEL
 STREET ADDRESS 4129 NW 135th Street
 CITY-ST-ZIP Miami FL 33054

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition
 D MARTINEZ, MANUEL ANTONIO
 STREET ADDRESS 4139 NW 135th Street
 CITY-ST-ZIP Miami FL 33054

TITLE NAME ☐ Change ☐ Addition
 D COUJI, WAL MANUEL
 STREET ADDRESS 4139 NW 135th Street
 CITY-ST-ZIP Miami FL 33054

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

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

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

TITLE NAME ☐ Change ☐ Addition
 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 the empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05.01.01

Date

306.688.4557

Daytime Phone #