

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90411 007 \*\*\*158.75

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**DOCUMENT # P00000045572**

1. Entity Name

**TUMICRO INTERNATIONAL, INC.**

Principal Place of Business

Mailing Address

201 ALHAMBRA CIRCLE  
 SUITE 711  
 CORAL GABLES FL 33134

201 ALHAMBRA CIRCLE  
 SUITE 711  
 CORAL GABLES FL 33134

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8405 NW 53<sup>rd</sup> ST

3. Mailing Address

8405 NW 53<sup>rd</sup> ST.

Suite, Apt. #, etc.

A-112

Suite, Apt. #, etc.

A-112

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-1009471

Applied For

Not Applicable

Zip

33166

Country

U.S.A.

Zip

33166

Country

U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAPPORT, STEPHEN R  
 201 ALHAMBRA CIRCLE  
 SUITE 711  
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name HANS BAUMGARTNER

Street Address (P.O. Box Number is Not Acceptable)

7200 NW 112<sup>th</sup> AVE.

City Miami

FL

Zip Code 33178

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.

Hans Baumgartner

(NOTE: Registered Agent signature required when reinstating)

04/25/2001

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 PD  
 NAME BAUMGARTNER, HANS  
 STREET ADDRESS 201 ALHAMBRA CIRCLE SUITE 711  
 CITY-ST-ZIP CORAL GABLES FL 33134

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
 NAME HANS BAUMGARTNER  
 STREET ADDRESS 7200 NW 112<sup>th</sup> AVE  
 CITY-ST-ZIP MIAMI, FL. 33178

TITLE M  
 NAME Angel Colmenares  
 STREET ADDRESS 10855 NW 50<sup>th</sup> ST # 106  
 CITY-ST-ZIP MIAMI FL. 33178

TITLE M  
 NAME ERICK PACHECO  
 STREET ADDRESS 10855 NW 50<sup>th</sup> ST # 106  
 CITY-ST-ZIP MIAMI FL 33178

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  
 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

HANS BAUMGARTNER

04/25/2001

Date

305-629-8337

Daytime Phone #

CR2E034 (10/00)