2001 UNIFORM BUSINESS REPORT (UBR)

Aug 29, 2001 8:00 am P00000052796 DOCUMENT # Secretary of State 1. Entity Name 08-29-2001 90003 007 ***550.00 INTERTUR OF HOLLYWOOD, INC. Principal Place of Business Mailing Address 6151 MIRAMAR PARKWAY SUITE 301 6151 MIRAMAR PARKWAY SUITE 301 MIRAMAR FL 33023 MIRAMAR FL 33023 2. Principal Place of Business Mailing Address 749 E. HALLANDALE BCH BLVO 1744 E. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For LLA-N DA-LE HALLANDA LE Not Applicable Country \$8.75 Additional USA 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NIETO, SERGIO E 8362 PINES BLVD SUITE 374 HOLLYWOOD FL 33024 ^{Zip Cod}**3**3009 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 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. (5/01)☐ Delete Change TIT! F TITLE Addition NIETO, SERGIO E OT314 NAME NAME 1749 E. HALLAN DALE BCH. BLVD. + 272 CR2E034 STREET ADDRESS 8362 PINES BLVD. SUITE 374 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD FL 33024 CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition

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 ental 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 tribute employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the information indicated on this report or suppler of the corporation or the receichanged, or on an attachmen iddress

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

NAME

STREET, ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

FILED