

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90086 036 ***150.00

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1. Entity Name

TRI EYE ANGLE, CORP.

Principal Place of Business

1830 MERIDIAN AVENUE APT. 201
MIAMI BEACH FL 33139

Mailing Address

1830 MERIDIAN AVENUE APT. 201
MIAMI BEACH FL 33139

726613



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

17050 SW 36th Court
Suite, Apt. #, etc.

3. Mailing Address

17050 SW 36th Court
Suite, Apt. #, etc.

City & State

Miramar Florida

City & State

Miramar Florida

4. FEI Number

65-1018198

Applied For
Not Applicable

Zip

33027

Country

Zip

33027

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ECHETO, GERALDINE
1830 MERIDIAN AVENUE APT. 201
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
17050 SW 36th Court

City

MIRAMAR

FL

Zip Code

33027

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)

03-05-01

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 D ☐ Delete
NAME FIGUEIRA, REINALDO
STREET ADDRESS 1830 MERIDIAN AVENUE APT. 201
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE D ☐ Delete
NAME ECHETO, GERALDINE
STREET ADDRESS 1830 MERIDIAN AVENUE APT. 201
CITY-ST-ZIP MIAMI BEACH FL 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 17050 SW 36th Court
CITY-ST-ZIP MIRAMAR FL 33027

TITLE ☒ Change ☐ Addition
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CITY-ST-ZIP MIRAMAR FL 33027

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TITLE ☐ Change ☐ Addition
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

03-05-01

Date

Daytime Phone #

CR2E034 (10/00)