

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000060269

1. Entity Name

MONEY POST INTERNATIONAL, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 APR -6 PM 4:23

Principal Place of Business

1450 MADRUGA AVENUE SUITE 200
CORAL GABLES FL 33146

Mailing Address

1450 MADRUGA AVENUE SUITE 200
CORAL GABLES FL 33146

2. Principal Place of Business

3138 Commodore Plaza

3. Mailing Address

3138 Commodore Plaza

Suite, Apt. #, etc.

313 - 314

Suite, Apt. #, etc.

313 - 314

City & State

Coconut Grove FL

City & State

Coconut Grove, FL

Zip

33133

Country

USA

Zip

33133

Country

USA

4. FEI Number

62-1022247

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NEVRAUMONT, MANUEL

1450 MADRUGA AVENUE SUITE 200
CORAL GABLES FL 33146

Name

HECTOR del CASTILLO

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

1450 MADRUGA AV. SUITE 200

City

Coconut Grove

FL

Zip Code

33146

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 file if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Feb 21/2001

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 \$158.00

AND 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME ALONSO ROJAS, JOSE A ☒ Delete
STREET ADDRESS 1450 MADRUGA AVENUE SUITE 200
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE PRESIDENT
NAME HECTOR del CASTILLO ☐ Change ☒ Addition
STREET ADDRESS 3990 KUMQUAT AV.
CITY-ST-ZIP COCONUT GROVE FL 33133

TITLE VD
NAME NEVRAUMONT, MANUEL ☒ Delete
STREET ADDRESS 1450 MADRUGA AVENUE SUITE 200
CITY-ST-ZIP CORAL GABLES FL 33146

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 21/2001

305-321-3000

Date

Daytime Phone #

CR2034 (10/00)