

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P000000074475** ✓
 1. Entity Name **BARCELONA INTERNATIONAL Inc.**

05-21-2002 91165 006 ***150.00
 F1LP00000074475

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business
FIRST UNION FINANCIAL CENTRE
200 South BISCAYNE BLVD.
DOWNTOWN MIAMI FL 33131

Mailing Address
FIRST UNION FINANCIAL CENTRE
200 South BISCAYNE BLVD.
DOWNTOWN MIAMI FL 33131

2. Principal Place of Business
200 South Biscayne Blvd

3. Mailing Address
200 South Biscayne Blvd.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
DOWNTOWN MIAMI FLA

City & State
DOWNTOWN MIAMI FLA

Zip
33131

Country

4. FEI Number
65-1036633

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

JUAN ALBERTO TABOAS
200 South Biscayne Blvd.
DOWNTOWN MIAMI FL 33131

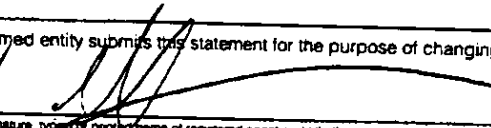
Name

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 reappointing)

04/30/02

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☒

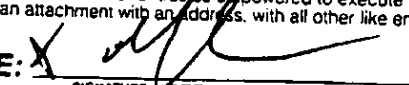
10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
PS, T	JUAN ALBERTO TABOAS	200 South Biscayne Blvd.	DOWNTOWN MIAMI FL 33131	☐	☐
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
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TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition

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

04/30/02

Date Daytime Phone #