

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 04, 2001 8:00 am**  
**Secretary of State**

04-04-2001 90021 041 \*\*\*150.00

**DOCUMENT # P00000081881**

1. Entity Name

**MICHELANGELI & TIBANEAR CORP.**

Principal Place of Business

10001 SW 53RD ST  
MIAMI FL 33165

Mailing Address

10001 SW 53RD ST  
MIAMI FL 33165

2. Principal Place of Business

961 W 79 PL

3. Mailing Address

961 W 79 PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Hialeah Florida

City & State

Hialeah Florida

4. FEI Number

65-1040102

Applied For

Not Applicable

Zip

33014

Country

USA

Zip

33014

Country

USA

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

6. Name and Address of Current Registered Agent

TIBANEAR, NORLAN  
10001 SW 53RD ST  
MIAMI FL 33165

7. Name and Address of New Registered Agent

Name

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

961 W 79 PL

City

Hialeah

FL

Zip Code

33014

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

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 PSD  
NAME TIBANEAR, NORLAN ☐ Delete  
STREET ADDRESS 10001 SW 53RD ST  
CITY-ST-ZIP MIAMI FL 33165

TITLE VTD  
NAME MICHELANGELI, GIANCARLO ☐ Delete  
STREET ADDRESS 4801 NW 7TH ST APT 606  
CITY-ST-ZIP MIAMI FL 33126

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 961 W 79 PL  
CITY-ST-ZIP Hialeah FL 33014

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
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:

*Norlan Tibanear* NORLAN TIBANEAR

02/14/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)