

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-08-2001 90013 001 ***150.00

DOCUMENT # P00000088634

1. Entity Name

THI HOLDINGS, INC.

Principal Place of Business

**10661 NORTH KENDALL DRIVE
SUITE 100
MIAMI FL 33176**

Mailing Address

**10661 NORTH KENDALL DRIVE
SUITE 100
MIAMI FL 33176**

2. Principal Place of Business

430 S. PARK ROAD

3. Mailing Address

430 S. PARK ROAD

Suite, Apt. #, etc.

APT # 3-3L

Suite, Apt. #, etc.

APT # 3-3L

City & State

HOLLYWOOD FLORIDA

City & State

HOLLYWOOD FLORIDA

Zip

33021

Country

U.S.A.

Zip

33021

Country

U.S.A.

4. FEI Number

65-1040809

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

**BESCHIROFF, HERNAN
10661 NORTH KENDALL DRIVE
SUITE 100
MIAMI FL 33176**

Name **BESCHIROFF, HERNAN**

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

430 S. PARK ROAD

APT # 3-3L

City

HOLLYWOOD

FL

Zip Code

33021

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 ☒

Hernan Beschiroff

3/5/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **P BESCHIROFF HERNAN**
STREET ADDRESS **430 S. PARK RD APT# 3-3L**
CITY-ST-ZIP **HOLLYWOOD FL 33021-8393**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **VP BARCO OSCAR**
STREET ADDRESS **9841 NOD HILL COURT**
CITY-ST-ZIP **SUNRISE, FL 33351**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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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: ☒

Hernan Beschiroff
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/5/01 (305) 815-5146

CR2E034 (10/00)