

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 13, 2001 8:00 am**  
**Secretary of State**

04-13-2001 90032 002 \*\*\*150.00

**DOCUMENT # P00000097930**

1. Entity Name

**DUTCH TELECOMMUNICATION, CORP.**

Principal Place of Business

**3900 NW 79TH AVE.  
SUITE 326  
MIAMI FL 33166**

Mailing Address

**3900 NW 79TH AVE.  
SUITE 326  
MIAMI FL 33166**

2. Principal Place of Business

**1656 N.W. 58th Ave.**

Suite, Apt. #, etc.

3. Mailing Address

**1656 N.W. 58th Ave.**

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

**Lauderhill**

**FL**

City & State

**Lauderhill**

**FL**

4. FEI Number

**65-1047538**

Applied For

☐ Not Applicable

Zip

**33313**

Country

Zip

**33313**

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**CERRO, RAQUEL  
3900 NW 79TH AVE.  
SUITE 326  
MIAMI FL 33166**

7. Name and Address of New Registered Agent

Name

**Iwan Sedney**

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

**1656 N.W. 58th Ave**

City

**Lauderhill**

**FL**

Zip Code

**33313**

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

*Iwan Sedney*

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	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>CERRO, RAQUEL</b>	
STREET ADDRESS	<b>3900 NW 79TH AVE. SUITE 326</b>	
CITY-ST-ZIP	<b>MIAMI FL 33166</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Iwan Sedney</b>	
STREET ADDRESS	<b>1656 N.W. 58th Ave</b>	
CITY-ST-ZIP	<b>Lauderhill, FL 33313</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Iwan Sedney*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)