

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90032 028 ***158.75

DOCUMENT # P00000102008

1. Entity Name

T.P. INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

780 NORTHWEST LEJEUNE ROAD
 SUITE 516
 MIAMI FL 33126

780 NORTHWEST LEJEUNE ROAD
 SUITE 516
 MIAMI FL 33126

2. Principal Place of Business

3. Mailing Address

2723 Hollywood Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Hollywood, FL

City & State

City & State

Zip

Country

Zip

Country

33020

4. FEI Number

65-1051739

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

PIEDRA, AURELIO A.
 780 N.W. LE FUNE RD. #516
 MIAMI FL 33126

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

X

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-9-02

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, 2002 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 PVST
 STREET ADDRESS VILAR, RAUL E
 CITY-ST-ZIP 780 NORTHWEST LEJEUNE ROAD SUITE 516
 MIAMI FL 33126

TITLE ☒ Change ☐ Addition
 NAME PRESS
 STREET ADDRESS RAUL E. VILAR
 CITY-ST-ZIP 2723 Hollywood Blvd.
 Hollywood, FL, 33020

TITLE ☐ Delete
 NAME D
 STREET ADDRESS VILAR, RAUL E
 CITY-ST-ZIP 780 NORTHWEST LEJEUNE ROAD SUITE 516
 MIAMI FL 33126

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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 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 an other like empowered.

SIGNATURE: X

RAUL E. VILAR

Date

03/05/02

Daytime Phone #

(954) 925 8656

CR2E034 (9/01)