## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 03, 2001 8:00 am DOCUMENT # P00000102048 Secretary of State TODO ENVIOS INTERNATIONAL, INC. 05-03-2001 90065 008 \*\*\*158.75 Principal Place of Business Mailing Address 7040 TYLER ST 7040 TYLER ST HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 2. Principal Place of Business 3. Mailing Address P.O. BOX 6050 304NSOU Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65-1053649 Applied For City & State PLALITATION Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired BROWNH Browned. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ZULETA SERFATY, CHARLES Street Address (P.O. Box Number is Not Acceptable) 4330 SHERIDAN ST, STE 202B HOLLYWOOD FL 33021 ROOSEVELT 87. 8. The above nam submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE: Registered Agent signature required when reinstating) pagent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is engible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (10/00) PRESI DELT. ☐ Change Delete TITLE TITLE **TESUS** G. ZULTETA LUNA, JORGE NAME NAME 4CI ROOSTIVELT STREET ADDRESS STREET ADDRESS 7040 TYLER ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD, HOLLYWOOD FL 33024 VICE - PEESIDELT ☐ Change ☐ Detete TITLE HELDREY GOMEZ NAME NAME C4CI ROOSEVELT ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P ☐ Change ☐ Addition ☐ Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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:

FILED