FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State
05-09-2002 90012 038 ***150.00

DOCUMENT # P00000103532 ✓

1) Entity Name:
AMERICAN V.I.P. SERVICE, INC.

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address	4. FEI Number	Applied For / Not Applicable
2000 BRIDGEVIEW CIRCLE ORLANDO, FL Zip 32824 Country USA	2000 BRIDGEVIEW CIRCLE Suite, Apt. #, etc. ORLANDO, FL Zip 32824 Country USA	59-3700979	

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Name: ROGERS SCRUGGS & HASKINS
Street Address (P.O. Box Number is Not Acceptable): 806 VERONA STREET SUITE #2
City KISSIMMEE FL Zip Code 34741

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 RICARDO ALMEIDA

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	January 1 - May 1 Fee is $150.00 After May 1, Fee is $550.00 Amended UBR is $61.25 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 P NAME STREET ADDRESS CITY ST ZIP	ROGERIO RIBEIRO DO SANTOS 2000 BRIDGEVIEW CIRCLE ORLANDO, FL. 32824	TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE VP NAME STREET ADDRESS CITY ST ZIP	RICARDO B. ALMEIDA 111 CLAYTON AVE. CELEBRATION, FL. 34747	TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP		TITLE NAME STREET ADDRESS CITY ST ZIP	**DO NOT WRITE IN THIS SPACE**
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12. 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 on an attachment with an address, all of which are empowered.

SIGNATURE: RICARDO ALMEIDA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

CR2E004B (12/01)