

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
Jul 15, 2002 8:00 am
Secretary of State**

DOCUMENT # *P00000112210* *65-1073387*

1. Entity Name
Alexis Promotion, Inc.

07-15-2002 90187 032 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4141 North Miami Ave

3. Mailing Address
4141 North Miami Ave

Suite, Apt. #, etc.
Suite 300

Suite, Apt. #, etc.
Suite 300

DO NOT WRITE IN THIS SPACE

City & State
Miami FL

City & State
Miami FL

4. FEI Number
65-1073387

Applied For
Not Applicable

Zip
33217-2848

Country
U.S.A.

Zip
33217-2848

Country
U.S.A.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Standley Alexis

Street Address, P.O. Box Number (Not Acceptable)
4141 North Miami Ave

Suite 300

City
Miami FL

FL *33217-2848*

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
Meredie Raphael

MERELIE RAPHAEL 05-01-2002

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
NAME
STREET ADDRESS
CITY-STATE-ZIP
*(P)
Standley Alexis
4141 N. Miami Ave, Suite 300
Miami FL 33127*

TITLE
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CITY-STATE-ZIP

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 219.07(3)(b), 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, with or other like empowerment.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanley Alexis
STANLEY ALEXIS. 5-01-2002

Attachment
#700000112210
120265

July 12, 2002

Florida Department of State
P.O. Box 1500
Tallahassee, FL 32302-1500

Subject: Reinstatement of Alexis Promotion Inc.
Reference: EIN 65-1073387

Please be advised, we have not received the notice in reference of the new fee for reinstatement of the year 2002.

We are requesting to wave the fee of \$550.00, however as required enclosed our check of \$150.00.

For further information please feel free to contact our office at (305) 576-3717.

Sincerely,



Karine Francois
Office Manager
Kf/kf