

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P01000017312**

1. Entity Name

MVP EVENTS, INC.

FILED

02 JUN -5 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

7003 N WATERWAY DRIVE STE 208
MIAMI FL 331557003 N WATERWAY DRIVE STE 208
MIAMI FL 33155

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

ALMIRALL, JOSE A

~~10305 SW 26 TER~~~~MIAMI FL 33185~~7003 N. WATERWAY DR.
SUITE # 208
MIAMI, FL 33155

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

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, 2002 Fee will be \$550.00
Make Check Payable to Department of State10. 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 DPT ☐ Delete
NAME ALMIRALL, JOSE A
STREET ADDRESS ~~10305 SW 26 TER~~ 7003 N. WATERWAY DR.
CITY-ST-ZIP ~~MIAMI FL 33185~~ SUITE # 208
MIAMI, FL 33155TITLE DPT ☐ Change ☐ Addition
NAME ALMIRALL, JOSE A
STREET ADDRESS 7003 N. WATERWAY DR. #208
CITY-ST-ZIP MIAMI, FL 33155TITLE DVS ☐ Delete
NAME ~~STEING, LAURA J~~ ALMIR
STREET ADDRESS ~~10305 SW 26 TER~~ 7003 N. WATERWAY DR.
CITY-ST-ZIP ~~MIAMI FL 33185~~ SUITE # 208
MIAMI, FL 33155TITLE DVS ☐ Change ☐ Addition
NAME ALMIRALL, LAURA J
STREET ADDRESS 7003 N. WATERWAY DR.
CITY-ST-ZIP SUITE # 208
MIAMI, FL 33155TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02

Date

305-264-6909

Daytime Phone #

CR2E034 (9/01)