

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State

05-05-2002 90023 033 ***150.00

DOCUMENT # P01000098086

1. Entity Name
SINGLETNET CORP.

Principal Place of Business

6175 NW 167TH ST.
SUITE G-34
MIAMI FL 33015

Mailing Address

6175 NW 167TH ST.
SUITE G-34
MIAMI FL 33015



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9010 S.W 137 Avenue

Suite, Apt. #, etc.
Suite 240

City & State
Miami, Florida

Zip
33186

Country
USA

3. Mailing Address

9010 S.W 137 Avenue

Suite, Apt. #, etc.
Suite 240

City & State
Miami, Florida

Zip
33186

Country
USA

4. FEI Number

65-1146586

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BETHENCOURT, OSCAR I
6175 NW 167TH ST.
SUITE G-34
MIAMI FL 33015

7. Name and Address of New Registered Agent

Name
Aloha Alvarez de Lugo
Street Address (P.O. Box Number is Not Acceptable)
9010 S.W 137th Avenue,
Suite 240
City **Miami** **FL** **Zip Code** **33186**

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]* **Aloha Alvarez de Lugo**

04/23/02

Signature of agent 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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ **Delete**
NAME **BRITO, ANTONIO E**
STREET ADDRESS **6175 NW 167TH ST. #G-34**
CITY-ST-ZIP **MIAMI FL 33015**

TITLE **D** ☐ **Delete**
NAME **UZCATEGUI, BORIS Z**
STREET ADDRESS **6175 NW 167TH ST. #G-34**
CITY-ST-ZIP **MIAMI FL 33015**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ **Change** ☐ **Addition**
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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 all other like empowered.

SIGNATURE:

[Signature] **Boris Uzcategui, Director**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/23/02

Date

(305) 385-0931

Daytime Phone #

CR2E034 (9/01)