

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90939 039 ***150.00

DOCUMENT # P02000036942

1. Entity Name
EYAL CONSULTING SERVICES, INC.



Principal Place of Business
**7441 WAYNE AVENUE #8R
NORTH MIAMI, FL 33141**

Mailing Address
**7441 WAYNE AVENUE #8R
NORTH MIAMI, FL 33141**

2. Principal Place of Business
2225 NW 97TH Ave.
Suite, Apt. #, etc.

3. Mailing Address
2225 NW 97TH Ave.
Suite, Apt. #, etc.

City & State
MIAMI, FL
Zip
33172
Country
USA

City & State
MIAMI, FL
Zip
33172
Country
USA

4. FEI Number
36-4493100

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**SILVA, FERNANDO
16300 NE 19 AVE SUITE C
NORTH MIAMI BEACH, FL 33024**

7. Name and Address of New Registered Agent

Name
DANNY CRESPI
Street Address (P.O. Box Number is Not Acceptable)
10030 NW 6TH Terrace
City
MIAMI FL Zip Code
33172

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

03-13-03

DATE

After May 1, 2003, fees will be based on
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WEINTRAUB, NICOLAS 7441 WAYNE AVENUE #8R NORTH MIAMI, FL 33141	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KELMESZES, ELIANA 7441 WAYNE AVENUE #8R NORTH MIAMI, FL 33141	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NICOLAS WEINTRAUB 2225 NW 97 TH AVENUE MIAMI, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ELIANA KELMESZES 2225 NW 97 TH AVENUE MIAMI, FL 33172	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NICOLAS S. WEINTRAUB

03-13-03

(305) 510-1717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)