

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2001 8:00 am
Secretary of State

04-09-2001 90031 025 ***150.00

0159608

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1. Entity Name

INNOVATIVE SERVICES INTERNATIONAL INC.

Principal Place of Business

**1607 PONCE DE LEON BLVD.
 CORAL GABLES FL 33134
 US**

Mailing Address

**1607 PONCE DE LEON BLVD.
 CORAL GABLES FL 33134
 US**

2. Principal Place of Business

9300 S. DADELAND BOULEVARD

Suite, Apt. #, etc.
SUITE 413

City & State
MIAMI, FLORIDA

Zip
33156

Country
U.S.A.

3. Mailing Address

9300 S. DADELAND BOULEVARD

Suite, Apt. #, etc.
SUITE 413

City & State
MIAMI, FLORIDA

Zip
33156

Country
U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0369888**

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PERE, JOSE LUIS
 1901 BRICKELL AVENUE
 APT. B1707
 MIAMI FL 33129**

7. Name and Address of New Registered Agent

Name
FOY H. HAMMONS, HAMMONS & ASSOCIATES, INC.

Street Address (P.O. Box Number is Not Acceptable)
2701 SOUTH BAYSHORE DRIVE, SUITE 606

City
COCONUT GROVE

FL

Zip Code
33133

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  **FOY H. HAMMONS** **02/07/2001**

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, 2001 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
PT ☐ Delete
 NAME
PAIZ, FERNANDO
 STREET ADDRESS
1607 PONCE DE LEON BLVD.
 CITY-ST-ZIP
CORAL GABLES FL 33134

TITLE
VPT ☐ Delete
 NAME
AHRENDT, CINTHIA
 STREET ADDRESS
10141 COSTA DEL SOL BLVD
 CITY-ST-ZIP
MIAMI FL 33178

TITLE
VPS ☐ Delete
 NAME
AHRENDT, BRUCE J
 STREET ADDRESS
10141 COSTA DEL SOL BLVD
 CITY-ST-ZIP
MIAMI FL 33178

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME ☐ Delete
 STREET ADDRESS
 CITY-ST-ZIP

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

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:  **Cinthia M. Ahrendt, VP & CFO**

4/5/01

305-670-9496

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)