

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000001730

1. Entity Name
LEVISSE, INC.

FILED
May 04, 2000 8:00 am
Secretary of State
05-04-2000 90140 049 ***150.00

Principal Place of Business
2814 COCONUT AVE
204
COCONUT GROVE FL 33133
US

Mailing Address
2814 COCONUT AVE
204
COCONUT GROVE FL 33133-3725
US

2. Principal Place of Business
2761 WEST TRADE AVE
Suite, Apt. #, etc.

3. Mailing Address
2761 WEST TRADE AVE
Suite, Apt. #, etc.

City & State
COCONUT GROVE, FL

City & State
COCONUT GROVE, FL

Zip
33133

Country
USA

Zip
33133

Country
USA

4. FEI Number
65-0291419

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LUIS, MIKE
2814 COCONUT AVENUE
STE. 204
COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent

Name
LUIS, MIKE

Street Address (P.O. Box Number is Not Acceptable)
2761 WEST TRADE AVENUE

City
MIAMI

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  MICHAEL A. LUIS 4/28/00

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, 2000 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	LEVIN, ERIC	1614 JEFFERSON AVE., SUITE 2	MIAMI BEACH FL	<input checked="" type="checkbox"/>
PSD	LUIS, MIKE	2814 COCONUT AVENUE	COCONUT GROVE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PSD	LUIS, MIKE	2761 WEST TRADE AVE	COCONUT GROVE, FL 33133	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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:  4/28/00 305-446-1929

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)