2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000024337				FILED Apr 03 2001 8:00 am		
1. Entity Nar	IMENT# P930000 ITO CORP.	24337	·v	Apr 03, 2001 8:00 am Secretary of State 04-03-2001 90003 013 ***150.00		
Principal Place of Business 3881SW 130TH AVE. MIAMI FL 33175		Mailing Address 3881 SW 130TH AVE. MIAMI FL 33175 US		818		
2. Principal Place of Business 3. Mailing A		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE	
City & State		City & State		4. FEI Number 65-0396396	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
CAZANAS, VIRGILIO F 4434 SW 74 STREET MIAMI FL 33155			Name MARCO A. CAZAMAS Street Address (P.O. Box Number is Not Acceptable) + HAME THE SHAME AND AMERICAN AMERIC			
			City M	[AM] FL	Zip Code	
8. The above	named entity publish this statement for the stat		s registered office or register	ered agent, or both, in the State of Florida.	30-01	
Tax filing requirement and elects to do so After MAY 1		After MAY 1, 20	!!! FEE IS \$150.00 001 Fee will be \$550.00 ble to Department of Sta	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11.	OFFICERS AND D		12.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	U CAZANAS, MARCO A 3881 SW 130 AVENUE MIAMI FL 33175	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition 6	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CAZANAS, VIRGILIO F 3881 SW 130 AVENUE MIAMI FL 33175	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete ,	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete 1	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
indicated	on this report or supplemental report is tr	ue and accurate and that r	ny signature shall have the	ection 119.07(3)(i), Florida Statutes. I further cert same legal effect as if made under oath; that I a 7, Florida Statutes; and that my name appears in	m an officer or director	