

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91491 020 ***158.75

DOCUMENT # P93000059311

1. Entity Name

M & S INTERNATIONAL GROUP, CORP



DO NOT WRITE IN THIS SPACE

10090130

2. Principal Place of Business

512 N.W. 26th Ave.

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Fl.

City & State

4. FEI Number

65-0430439

Applied For

Not Applicable

Zip

Country

U.S.A.

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Michelena, Pedro P. Jr

Street Address (P.O. Box Number is Not Acceptable)

512 N.W. 26th Ave.

City

Miami,

FL

Zip Code

33125

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 reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 PD
NAME
STREET ADDRESS
CITY - ST - ZIP

MICHELENA, PEDRO P. JR
512 N.W. 26 Ave.
Miami, Fl. 33125

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE SD
NAME
STREET ADDRESS
CITY - ST - ZIP

MICHELENA, CONSUELO
512 N.W. 26 Ave.
Miami, Fl. 33125

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE TD
NAME
STREET ADDRESS
CITY - ST - ZIP

MICHELENA, PEDRO P III
512 N.W. 26 Ave.
Miami, Fl. 33125

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

PEDRO P. MICHELENA

Presdt

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/03

CR2E034B (12/02)