

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000062738

1. Entity Name

ENDOSCOPY TECHNOLOGY, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90199 008 ***150.00

Principal Place of Business

5190 NW 167TH ST.
SUITE 204
MIAMI FL 33014
US

Mailing Address

5190 NW 167TH ST.
SUITE 204
MIAMI FL 33014-6338
US

2. Principal Place of Business

SAME

3. Mailing Address

SAME

Suite, Apt. #, etc.

202

Suite, Apt. #, etc.

202

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0449319

Applied For

Not Applicable

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

GUSTAVO IGNACIO MAZZOLINO
13155 IXORA COURT, #701
MIAMI FL 33181

Name
SAME

Street Address (P.O. Box Number is Not Acceptable)
1836 NE 213 LANE

City

NORTH MIAMI

FL

Zip Code
33179

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
TKACHUCK, SERGIO
RIVADAVIA 1479 6TH FLOOR, APT. B
BUENOS AIRES, ARGENTIANA 1033 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
ZINNI, JUAN C
RIVADAVIA 1479 6TH FLOOR, APT. B
BUENOS AIRES, ARGENTIANA 1033 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
GUSTAVO IGNACIO MAZZOLINO
13155 IXORA COURT, #701
MIAMI FL 33181 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

1836 NE 213 LANE
NORTH MIAMI FL 33179

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
MAURO ALAN LEVINTON
1456 SPRINGSIDE DRIVE
WESTON FL 33326 ☐ 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
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAURO LEVINTON

4/14/00

305-628-1090

Date

Daytime Phone #

CR2E034 (9/99)