## **2001 UNIFORM BUSINESS REPORT (UBR)**

## FILED May 16, 2001 8:00 am Secretary of State

DOCUMENT # P94000082014  1. Entity Name							Secretary of State 05-16-2001 90389 049 ***150.00						
	MONT	DEVELOPMENT	CORP.		·								
Principal Place of Business  JESUS MONTESANO 8514 NW 165TH ST MIAMI, FL.33016			Mailing Address JESUS MONTESANO 8514 NW 165TH ST MIAMI, FL. 33016										
2. Principal Place of Business			3. Mailing Address							4	2		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State			City & State		4. FEI Numb	· · · · · · · · · · · · · · · · · · ·			pplied For lot Applicable	•			
Zip		Country	Zip	Coun	ntry	5. Certificate				Fee I	Require	iditional ed	
	6. Name	and Address of Current	Registered Agent		Name .	7. Name and	Address	of New Ro	gistere	d Agent	1		-
					Marrie			-					
					Street Add	ress (P.O. Box Number					· ·		
						•					·.		
							FL Zip Coo					e	
8 The shows	nomed entity	submits this statement to	r the purpose of changing its	register	ed office or re	gistered agent, or bot	th. in the S	tate of Flor	ida.				
	,												1
SIGNATURE													
	Signature, typed o	or printed name of registered agent (	nd lide if applicable. • (NOTE	Registere	d Agent signature	required when reinstatting)			DATE				
9. This corporate filing in	oration is eligit		nd lide if applicable. (NOTE	Registere (1° <b>PEC</b>	d Apent signature 19:\$150.00 will be \$550	required when reinstating)  10. Ele	ection Can	npaign Fina	DATE			00 May Be	
9. This corporate (See criter)	oration is eligit requirement a	or printed name of registered agent to ble to satisfy its Intangible and elects to do so.	FILE NOW! After MAY 1, 20 1 Make Check Payab	Registere PEE 01 Fee 1e to De	d Apent signature 19:\$150.00 will be \$550	required when reinstating)  10. Ele  10. Tru  1.51ate	ection Carr	paign Fina	DATE ancing		Adde	od to Fees	
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9. This corporate filing is (See criter 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	JESUS 8514 MIAMI MIGUEI	or printed name of registered agent in the to satisfy its Intangible and elects to do so.  OFFICERS AND MONTESANO NW 165TH ST T, FL.33016  L A. CHAMAH	PRS	Projectors  II PEC  71 Fee 1e to Dr  12.  ITLL  NAM  STREE CITY  ITLL  I	d Apent signature (15), \$150,000 will be; \$550 ppartment of the control of the co	required when reinstating)  10. Ele  10. Tru  1.51ate	ection Carr	paign Fina	DATE ancing	NO DIRI	Adde ECTOR Change	RS IN 11	
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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:

MLaman MIGUEL A. CHAMAH

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4/24/01 (305) 870-0903