

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 13, 2001 8:00 am
Secretary of State

07-13-2001 90007 045 ***550.00

DOCUMENT # **P95000 000 247**

1. Entity Name

TYPHOON ENTERPRISES, INC.

Principal Place of Business

**999 PONCE DE LEON BLVD.
 SUITE 1110
 CORAL GABLES, FL 33134**

Mailing Address

**999 PONCE DE LEON BLVD.
 SUITE 1110
 CORAL GABLES, FL 33134**

C0073406

2. Principal Place of Business

12002 S.W. 101 STREET

3. Mailing Address

12002 S.W. 101 STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI, FLORIDA

City & State
MIAMI, FLORIDA

4. FEI Number

65-0598457

Applied For

Not Applicable

Zip
33186

Country
U.S.A

Zip
33186

Country
U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CARLOS A. TRIAY
 999 PONCE DE LEON BLVD.
 SUITE 1110
 CORAL GABLES, FLORIDA 33134**

7. Name and Address of New Registered Agent

Name
CARMELO DIAZ-MARTINEZ

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

12002 S.W. 101 STREET

City
MIAMI

FL

Zip Code
33186

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  , **CARMELO DIAZ-MARTINEZ, VP**

(NOTE: Registered Agent signature required when reinstating)

DATE

7/10/01

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, 2001 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 **PT** ☒ Delete
 NAME **LUIS HERRERA**
 STREET ADDRESS **2201 S.W. 89TH CT**
 CITY-ST-ZIP **MIAMI, FLORIDA 33165**

TITLE **P** ☐ Change ☒ Addition
 NAME **EDUARDO PUBILL RIVERA**
 STREET ADDRESS **MARGINAL SAN AGUSTIN KM 1,8**
 CITY-ST-ZIP **RIO PIEDRAS, PUERTO RICO 00923**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **V** ☐ Change ☒ Addition
 NAME **CAMELO DIAZ-MARTINEZ**
 STREET ADDRESS **12002 S.W. 101 STREET**
 CITY-ST-ZIP **MIAMI, FLORIDA 33186**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S** ☐ Change ☒ Addition
 NAME **MARITZA PUBILL RIVERA**
 STREET ADDRESS **MARGINAL SAN AGUSTIN KM 1,8**
 CITY-ST-ZIP **RIO PIEDRAS, PUERTO RICO 00923**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **T** ☐ Change ☒ Addition
 NAME **ROSALMA PUBILL RIVERA**
 STREET ADDRESS **MARGINAL SAN AGUSTIN KM 1,8**
 CITY-ST-ZIP **RIO PIEDRAS, PUERTO RICO 00923**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

CARMELO DIAZ-MARTINEZ, VP

305-299-2662

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)