

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000024458

1. Entity Name  
ACROSS INTERNATIONAL, INC.

R

**FILED**  
**Jul 18, 2000 8:00 am**  
**Secretary of State**

07-18-2000 90011 049 \*\*\*150.00

Principal Place of Business  
113 LAKE EMERALD DRIVE  
SUITE 201  
FORT LAUDERDALE FL 33309  
US

Mailing Address  
113 LAKE EMERALD DRIVE  
SUITE 201  
FORT LAUDERDALE FL 33309  
US

2. Principal Place of Business  
6250 Palm Trace Landings Drive  
Suite, Apt. #, etc. 205  
City & State Davie, Florida  
Zip 33314 Country USA

3. Mailing Address  
Same as #2  
Suite, Apt. #, etc. same as #2  
City & State same as #2  
Zip same as #2 Country same as #2



DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

TOLEDO, KATHLEEN M  
113 LAKE EMERALD DRIVE  
SUITE 201  
FT. LAUDERDALE FL 33309

## 7. Name and Address of New Registered Agent

Name Kathleen M. Toledo  
Street Address (P.O. Box Number is Not Acceptable) 6250 Palm Trace Landings Drive #205  
City Davie FL Zip Code 33314

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 \_\_\_\_\_ (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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE	D	<input type="checkbox"/> Delete
NAME	TOLEDO, RENATO M	
STREET ADDRESS	113 LAKE EMERALD DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	
TITLE	P	<input type="checkbox"/> Delete
NAME	TOLEDO, KATHLEEN M	
STREET ADDRESS	113 LAKE EMERALD DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Renato M. Toledo	
STREET ADDRESS	6250 Palm Trace Landings Drive #205	
CITY-ST-ZIP	Davie FL 33314	
TITLE	P	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kathleen M. Toledo	
STREET ADDRESS	6250 Palm Trace Landings Drive #205	
CITY-ST-ZIP	Davie FL 33314	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Kathleen M. Toledo  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 07/11/00 951 791-9401  
Daytime Phone #

Attachment  
DT# 281357  
DW 71362

ACROSS INTERNATIONAL inc.  
6250 Palm Trace Landings Drive Ste. 205  
Davie, FL. 33314  
Voice: 954 484.5815  
Fax: 954 484.7232  
e-mail: acrintl@bellsouth.net

07/11/00

Dear Secretary of the State;

my company only received this form now in July. I never received the original form. If you look at our past history of paying and filing we have always done so in the appropriate time frame.

Our company had a change of address But this information should not interfere with the receiving of this dated material.

Enclosed is our check for the amount of \$150.00 Because I feel that we are not at fault for the delinquent payment.

Thank you,

Kathleen M. Toledo  
president