

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000024860

1. Entity Name

INTERNATIONAL FINANCIAL PRODUCTS, INC.

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90022 033 ***158.75

Principal Place of Business

Mailing Address

250 PARK AVENUE SOUTH
SUITE 200
WINTER PARK FL 32789

250 PARK AVENUE SOUTH
SUITE 200
WINTER PARK FL 32789-4388

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3309701

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

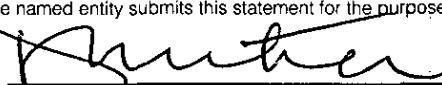
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MICELI, JEROME F
250 PARK AVENUE SOUTH
SUITE 200
WINTER PARK FL 32789

Name
DIEGO J. VEITIA
Street Address (P.O. Box Number is Not Acceptable)
250 PARK AVENUE SOUTH
SUITE 200
City WINTER PARK FL Zip Code 32789

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.

DIEGO J. VEITIA, DIRECTOR, CEO, CHAIRMAN, SECRETARY

(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	S	<input type="checkbox"/> Delete
NAME	VEITIA, DIEGO J	
STREET ADDRESS	250 PARK AVENUE SOUTH SUITE 200	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	MICELI, JEROME F	
STREET ADDRESS	250 PARK AVENUE SOUTH SUITE 200	
CITY-ST-ZIP	WINTER PARK FL	
TITLE	VPM	<input type="checkbox"/> Delete
NAME	VEITIA, TRESA N	
STREET ADDRESS	250 PARK AVENUE SOUTH, STE 200	
CITY-ST-ZIP	WINTER PARK FL	
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"/> 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		
TITLE	(T) HINZ, JONATHAN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	250 PARK AVENUE SOUTH, STE 200	
STREET ADDRESS	WINTER PARK, FL	
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)