2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000027085

1. Entity Name

AMPEX INTERNATIONAL INC.

FILED
May 10, 2001 8:00 am
Secretary of State
05-10-2001 90131 015 ***150.00

Principal Place of Business	Mailing Address
601 N.W. 11th Street Miami, Florida 33136	920 Altara Avenue Coral Gables,Florida 33146

2. Principal Place of Business		3. Mailing Address	
601 N.W. 11th Street		920 Altara Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Miami		City & State: Coral Gables	
Zip: 33136	Country: USA	Zip: 33146	Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0569661 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROLANDO SANCHEZ-MEDINA JR. ESQ.
201 SOUTH BISCAYNE BLVD.
SUITE 2200
MIAMI, FLORIDA 33131

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

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, 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 NAME STREET ADDRESS CITY-ST-ZIP	ALEXIS RODRIGUEZ JR. 920 ALTARA AVENUE CORAL GABLES, FLORIDA ☐ 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
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CR2E034 (11/00)

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: Alexis Rodriguez Jr. ALEXIS RODRIGUEZ JR. 04/25/01 305-577-6051

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #