

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000033342

1. Entity Name

BANCOR, Inc.

FILED

May 18, 2001 8:00 am  
Secretary of State

05-18-2001 91240 041 \*\*\*150.00

Principal Place of Business

Mailing Address

848 BRICKELL AVE. SUITE 601  
MIAMI FL. 33131

2. Principal Place of Business

848 BRICKELL AVENUE

3. Mailing Address

848 BRICKELL AVENUE

Suite, Apt. #, etc.

601

Suite, Apt. #, etc.

601

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33131

Country

Zip

33131

Country

4. FEI Number

65-0578481

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VALCORP SECURITIES, Inc.

848 BRICKELL AVE. SUITE 601

MIAMI, FL. 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

JUAN SANTAELLA, PRESIDENT

4-23-01

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

TITLE D DIRECTOR, PRESIDENT ☐ Delete

NAME SANTAELLA, JUAN

STREET ADDRESS 848 BRICKELL AVE. SUITE 601

CITY-ST-ZIP MIAMI FL. 33131

TITLE DIRECTOR, VICE PRESIDENT ☐ Delete

NAME JUAN B. SANTAELLA

STREET ADDRESS 848 BRICKELL AVE. SUITE 601

CITY-ST-ZIP MIAMI FL. 33131

TITLE DIRECTOR, SECRETARY ☐ Delete

NAME SANTAELLA, HECTOR

STREET ADDRESS 848 BRICKELL AVE. SUITE 601

CITY-ST-ZIP MIAMI FL. 33131

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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

JUAN SANTAELLA, PRESIDENT

305 3770757

4-23-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/100)