## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Aug 31, 2000 8:00 am Secretary of State DOCUMENT # P95000036223 MUNDO ELECTRONICS, INC. 04-03-2000 90115 048 \*\*\*150.00 Principal Place of Business Mailing Address 7225 NW 25TH ST 7225 NW 25TH ST 20182 MIAMI FL 33126 MIAMI FL 33126 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 65-0593153 Not Applicable Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KASSEM KASSEM, ABBAS Street Address (P.O. Box Number is Not Acceptable) 340 S W 26 RD **MIAMI FL 33129** sw 100 street 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. <u>8-58-5000</u> SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete ☐ Change ☐ Addition TITLE HIJAZI, HASSAN A NAME NAME STREET ADDRESS 1501 BELLA VISTA AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL GABLES FL 33156 HIJAZI ADNAV 🖆 Change TITLE ☐ Delete NAME HIJAZI, ADNAN NAME 13835 Sw 67 place STREET ADDRESS 1341 LUGO AVE STREET ADDRESS MIAMI FL 33158 CITY-ST-ZIP CORAL GABLES FL 33156 CITY-ST-ZIP Change TITLE TITLE Delete KASSEM, ABBAS-I-7150 SW 190 STREET KASSEM; ABBAS I NAME -· NAME \_ STREET ADDRESS 340 SW 26 RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Pinecrest FL33156 MIAMI FL 33129 Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP $\Box$ TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP $\Box$ : Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 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 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

KASSEM8-28-2000 305 4/3

## Processing - Documents

7225 N. W. 25th street Suite 203 Miami Fl 33129 (305)463-9490 (305)463-9692

August 28, 2000

To Whom It May Concern:

We did not receive the report you mailed us for corrections. We are sending the corrected report with this letter. Please update the file according to the changes made in this report. The registered agent remains the same. Please also note the changes made in the addresses of the Officers. The fee was sent when we filed back in March of this year.

Thank you for your attention and help in this matter.

Sincerely

ABBAS I KASSEM, secretary