

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000042985

1. Entity Name

MVR INTERNATIONAL, INC.

FILED

May 20, 2000 8:00 am
Secretary of State

05-20-2000 90010 029 ***150.00

Principal Place of Business

Mailing Address

7580 SOUTHGATE BLVD
33
N LAUDERDALE FL 33068
US

7580 SOUTHGATE BLVD
33
N LAUDERDALE FL 33068-1389
US

2. Principal Place of Business

7035 NW 88th AVE.

Suite, Apt. #, etc.

3. Mailing Address

7035 NW 88th AVE.

Suite, Apt. #, etc.

City & State

TAMARAC

Zip
FL

Country

33321

City & State

TAMARAC

Zip
FL

Country

33321

4. FEI Number

65-0586292

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

KHALLOUQI, MIKKI
7580 SOUTHGATE BLVD #33
N LAUDERDALE FL 33068

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
KHALLOUQI, MIKKI
5615 NW 108 TERR
CORAL SPRINGS FL 33076

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSD
KHALLOUQI, VERA
5615 NW 108 TERR
CORAL SPRINGS FL 33076

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

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:

SUSU MIKKI J. KHALLOUQI

Date

Daytime Phone #

04-27-00 954-720-672

CR2E034 (9/99)