

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P950000-10018**

FILED

01 MAY -1 PM 4: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Entity Name
N & L Consulting, Inc.

Principal Place of Business
**145 E. Flagler ST. # A4
Miami, FL. 33131**

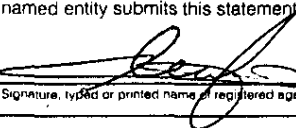
Mailing Address

DO NOT WRITE IN THIS SPACE

Principal Place of Business		3. Mailing Address		4. FEI Number 05-0619593		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
City & State		City & State				
Zip	Country	Zip	Country			

6. Name and Address of Current Registered Agent Ramiro Perez 145 Madeira Av. # 315 Coral Gables, FL. 33134				7. Name and Address of New Registered Agent Name Nicola Clemente Street Address (P.O. Box Number is Not Acceptable) 196 Wimbledon Lake Dr. City Plantation FL Zip Code 33324			
--	--	--	--	--	--	--	--

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  (NOTE: Registered Agent signature required when reinstating) DATE _____

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	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	President	Nicola Clemente	196 Wimbledon Lake Plantation, FL. 33324				
	Vice-President	Larisa Clemente	196 Wimbledon Lake Plantation, FL. 33324				

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:  **429.01** **9548183525**