## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 05, 2001 8:00 am Secretary of State DOCUMENT # **P95000071056** THE ALIX CORPORATION 03-05-2001 90289 020 \*\*\*150.00 Principal Place of Business Mailing Address 2013 DUTCHESS LANE 2306A WINTER WOODS BLVD. WINTER PARK FL 32792 WINTER PARK FL 32792-1906 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3334899 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RODRIGUEZ, FELIX J Street Address (P.O. Box Number is Not Acceptable) 2013 DUTCHESS LANE WINTER PARK FL 32792 City Zip Code FL 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) FILE NOW!!! FEE IS \$150.00 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 MAY 1, 2001 Fee will be \$550.00 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. ☐ Addition ☐ Delete TITLE Change RODRIGUEZ. ANNETTE STREET ADDRESS 2013 DUTCHESS LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WINTER PARK FL 32792 ☐ Defete TITLE ☐ Change ☐ Addition NAME RODRIGUEZ, FELIX J NAME STREET ADDRESS 2013 DUTCHESS LANE STREET ADDRESS CITY-ST-ZIP WINTER PARK FL 32792 CITY-ST-ZIP TITLE ☐ Delete TITLE \_ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJTY-ST-7IP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR