

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State

05-24-2001 90006 028 ***150.00

DOCUMENT # **P95000077404**
 1. Entity Name
Eighth Floor Services, Inc.

Principal Place of Business Mailing Address
3191 Coral way **3191 Coral way**
Suite 800 **Suite 800**
Miami Fl 33145 **Miami Fl 33145**

2. Principal Place of Business 3. Mailing Address
999 Bnc de Leon Blvd **999 Bnc de Leon Blvd**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
PH 1120 **PH 1120**


City & State City & State
Coral Gables Fl **Coral Gables Fl**
 Zip Country Zip Country
33134 USA **33134 USA**

4. FEI Number **65-0612215** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Jose C. Bofill
3191 Coral way, suite 800
Miami, Fl 33145

7. Name and Address of New Registered Agent
 Name **Jose C. Bofill**
 Street Address (P.O. Box Number is Not Acceptable)
999 Bnc de Leon Blvd. PH 1120
 City **Coral Gables** FL Zip Code **33134**

8. The above named party submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE  **Jose C. Bofill, Pres.** DATE **4/23/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 P/D	Jose C. Bofill	<input type="checkbox"/> Delete
NAME	3191 Coral way, #800	
STREET ADDRESS	Miami Fl 33145	
CITY-ST-ZIP		
TITLE V/D	Patrick Vilor	<input type="checkbox"/> Delete
NAME	3191 Coral way, #800	
STREET ADDRESS	Miami Fl 33145	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/D	Jose C. Bofill	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	999 Bnc de Leon Blvd, PH 1120	
STREET ADDRESS	Coral Gables Fl 33134	
CITY-ST-ZIP		
TITLE V/D	Patrick Vilor	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	999 Bnc de Leon Blvd, PH 1120	
STREET ADDRESS	Coral Gables Fl 33134	
CITY-ST-ZIP		
TITLE S/D	Ana M. Veliz	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	999 Bnc de Leon Blvd, PH 1120	
STREET ADDRESS	Coral Gables Fl 33134	
CITY-ST-ZIP		
TITLE T/D	L. Michael Poffins	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	999 Bnc de Leon Blvd, PH 1120	
STREET ADDRESS	Coral Gables Fl 33134	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:  DATE **4/24/01** (305) 446-2200
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Ana M. Veliz, Director** Daytime Phone #

CR2E034 (11/00)