

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000085861

1. Entity Name

MSB IMPORTS, INC.

FILED

Apr 07, 2000 8:00 am  
Secretary of State

04-07-2000 90067 049 \*\*\*150.00

Principal Place of Business

1570 IVES DAIRY RD.  
SUITE 300  
NO. MIAMI BCH FL 33179  
US

Mailing Address

787 NE 82ND TERRACE  
MIAMI FL 33139-2334  
US

2. Principal Place of Business

96A NE 40th Street  
Suite, Apt. #, etc.

3. Mailing Address

96A NE 40th Street  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0627018

Applied For

Not Applicable

Zip

33137

Country

USA

Zip

33137

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MARILYN BLACK  
1800 N.E. 114TH ST.  
APT. 1005  
NO. MIAMI FL 33181

7. Name and Address of New Registered Agent

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

TITLE ☐ Delete

NAME **Secretary**  
BLACK, MARILYN  
STREET ADDRESS 1800 NE 114 ST, APT 1005  
CITY-ST-ZIP N MIAMI FL

TITLE ☐ Delete

NAME DP  
BLACK, MICHAEL S.  
STREET ADDRESS 787 NE 82ND TERR  
CITY-ST-ZIP MIAMI FL

TITLE ☐ Delete

NAME VP/Treasurer  
Melville C. Levet (Levet)  
STREET ADDRESS 1125 West Ave # 703  
CITY-ST-ZIP Miami Beach, FL 33139

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME President  
Michael S. Black  
STREET ADDRESS 1523 West Ave. #101  
CITY-ST-ZIP Miami Beach, FL 33139

TITLE ☐ Change ☒ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: Melville C. Levet  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/00 305-576-4017  
Date Daytime Phone #

CR20034 (9/00)