

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000096763

1. Entity Name

Bionne, Inc.

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90004 029 \*\*\*150.00

B0090600

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address  
9400 Old Cutler Lane 9400 Old Cutler Lane  
Coral Gables, FL 33156 Coral Gables, FL 33156

2. Principal Place of Business 3. Mailing Address  
100 S.E. 2nd Street 100 S.E. 2nd Street

Suite, Apt. #, etc. Suite, Apt. #, etc.  
Suite 4000 Suite 4000

City & State City & State  
Miami, FL Miami, FL

Zip Country Zip Country  
33131 USA 33131 USA

4. FEI Number Applied For  
65-0682038 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

Richard Gutman  
100 S.E. 2nd Street, Suite 4000  
Miami, FL 33131

## 7. Name and Address of New Registered Agent

Name Ignacio G. del Valle  
Street Address (P.O. Box Number is Not Acceptable)  
100 S.E. 2nd Street  
Suite 4000  
City Miami FL Zip Code 33131

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 Richard Gutman Ignacio G. del Valle 4/27/00  
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 PD ☐ Delete  
NAME Del Rosal Jorge Luis Sr.  
STREET ADDRESS 9400 Old Cutler Lane  
CITY-ST-ZIP Coral Gables, FL 33156

TITLE TSD ☐ Delete  
NAME Del Rosal Jorge Luis Jr.  
STREET ADDRESS 9400 Old Cutler Road  
CITY-ST-ZIP Coral Gables, FL 33156

TITLE D ☐ Delete  
NAME Del Rosal, Zoila C.  
STREET ADDRESS 9400 Old Cutler Lane  
CITY-ST-ZIP Coral Gables, FL 33156

TITLE D ☐ Delete  
NAME Del Rosal Cabrera, Virginia  
STREET ADDRESS 9400 Old Cutler Lane  
CITY-ST-ZIP Coral Gables, FL 33156

TITLE D ☐ Delete  
NAME Del Rosal Wilson, Elena  
STREET ADDRESS 9400 Old Cutler Lane  
CITY-ST-ZIP Coral Gables, FL 33156

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 100 S.E. 2nd Street, Suite 4000  
CITY-ST-ZIP Miami, FL 33131

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 100 S.E. 2nd Street; Suite 4000  
CITY-ST-ZIP Miami, FL 33131

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 100 S.E. 2nd Street, Suite 4000  
CITY-ST-ZIP Miami, FL 33131

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 100 S.E. 2nd Street, Suite 4000  
CITY-ST-ZIP Miami, FL 33131

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 100 S.E. 2nd Street, Suite 4000  
CITY-ST-ZIP Miami, FL 33131

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jorge Luis del Rosal 4/28/00 305-573-8600  
PRESIDENT Date Daytime Phone #