

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 30, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # P96000023069**1. Entity Name  
TECHNOCOMM OF SOUTH FLORIDA, INC.Principal Place of Business  
3850 S.W. 87 AVE., #306-A  
MIAMI FL 33165  
Mailing Address  
P.O. BOX 832483  
MIAMI FL 332832. Principal Place of Business  
9380 SUNSET DRIVE

3. Mailing Address

Suite, Apt. #, etc.  
SUITE B-140

Suite, Apt. #, etc.

City & State  
MIAMI FL

City &amp; State

Zip  
33173 Country

Zip Country

4. FEI Number  
65-0653611Applied For  
Not Applicable5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

MESTRIL RAUL  
8500 SW 99TH CTMIAMI FL  
33173 US

## 7. Name and Address of New Registered Agent

Name  
MESTRIL RAULStreet Address (P.O. Box Number is Not Acceptable)  
9380 SUNSET DRIVE

SUITE B-140

City  
MIAMI FL Zip Code  
33173

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 \_\_\_\_\_ 04/30/2001  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE9. 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 S ☐ Delete  
NAME MESTRIL ANA F  
STREET ADDRESS 3850 S.W. 87 AVE., #306-A  
CITY-ST-ZIP MIAMI FL 33165TITLE D ☐ Delete  
NAME MESTRIL RAUL  
STREET ADDRESS 8500 SW 99TH CT  
CITY-ST-ZIP MIAMI FL 33173TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE S ☒ Change ☐ Addition  
NAME MESTRIL ANA F  
STREET ADDRESS 9380 SUNSET DRIVE SUITE B-140  
CITY-ST-ZIP MIAMI FL 33165TITLE D ☒ Change ☐ Addition  
NAME MESTRIL RAUL  
STREET ADDRESS 9380 SUNSET DRIVE SUITE B-140  
CITY-ST-ZIP MIAMI FL 33173TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ 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: Raul Mestril D 04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)