

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000031695

1. Entity Name

PINNACLE MARKETING GROUP, INC.

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

05-19-2000 90054 017 ***150.00

Principal Place of Business

13394 NW 42ND TERR
MIAMI FL 33178
US

Mailing Address

12973 S.W. 112 STREET STE. #275
MIAMI FL 33186-4768

2. Principal Place of Business

11349 NW 42nd Terr.

3. Mailing Address

11349 NW 42nd Terr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-0660963

Applied For

Not Applicable

Zip

33178

Country

Miami-Dade

Zip

33178

Country

Miami-Dade

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INSUA, EDUARDO D
11401 SW 145 SW 145 AVENUE
MIAMI FL 33186

Name

Insua, Eduardo D.

Street Address (P.O. Box Number is Not Acceptable)

11349 NW 42nd Terrace

City

Miami

FL

Zip Code

33178

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

Eduardo D. Insua

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04/17/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	INSUA, EDUARDO D	
STREET ADDRESS	11349 NW 42ND TERR	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE		<input type="checkbox"/> Delete
NAME		
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CITY-ST-ZIP		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

Eduardo D. Insua

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/00

Date

(305) 406-9563

Daytime Phone #

CR2E034 (9/99)