

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000046963

1. Entity Name

SWITCHING INTERNATIONAL CORPORATION

FILED

Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90025 032 ***150.00

Principal Place of Business

Mailing Address

3800 EAST OCEAN DRIVE
SUITE 1610
FORT LAUDERDALE FL 33308
US

3556 NORTH OCEAN BLVD
#205
FORT LAUDERDALE FL 33308-6752
US

2. Principal Place of Business

4200 GAIT OCEAN DR.

3. Mailing Address

Gait-Ocean Dr.

Suite, Apt. #, etc.

SUITE # 20 B

Suite, Apt. #, etc.

SUITE # 20 B

City & State

FT. Lauderdale, FL

City & State

FT. Lauderdale, FL

Zip

33308

Country

Broward

Zip

33308

Country

Broward



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0675128

Applied For

Not Applicable

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

CASTILLO B., ALVARO
1390 BRICKELL AVE.
SUITE 200
MIAMI FL 33131

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 D
NAME SUAREZ, ROGELIO
STREET ADDRESS 3800 EAST OCEAN DRIVE SUITE #1610
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE D
NAME SATTler, CARMEN L
STREET ADDRESS 3800 EAST OCEAN DRIVE SUITE #1610
CITY-ST-ZIP FORT LAUDERDALE FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SUAREZ ROGELIO
NAME SUAREZ ROGELIO
STREET ADDRESS 4200 GAIT OCEAN DR. #20B
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE SATTler, CARMEN L
NAME SATTler, CARMEN L
STREET ADDRESS 4200 GAIT OCEAN DR. #20B
CITY-ST-ZIP FORT LAUDERDALE, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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

Jan 20 / 00 (954) 563-4141