

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 16, 2001 8:00 am
Secretary of State
 03-16-2001 90005 027 ***150.00

0151516

DOCUMENT # P96000049103

1. Entity Name
VITRON RPH, INC.

Principal Place of Business

Mailing Address

**601 BRICKELL KEY DRIVE
 SUITE 805
 MIAMI FL 33131**

**601 BRICKELL KEY DRIVE
 SUITE 805
 MIAMI FL 33131**

D0025724



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**9655 S. DIXIE HWY
 Suite, Apt. #, etc.
 3rd. FLOOR**

**9655 S. DIXIE HWY
 Suite, Apt. #, etc.
 3rd. FLOOR**

City & State

City & State

MIAMI, FLORIDA

MIAMI, FLORIDA

Zip

Country

Zip

Country

33156

DADE

33156

DADE

4. FEI Number **52-1983679**

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

**ALLEN & GALEGO
 601 BRICKELL KEY DRIVE
 MIAMI FL 33131**

Name
EMERY SHEER

Street Address (P.O. Box Number is Not Acceptable)
9655 S. DIXIE HWY

3rd. FLOOR

City

MIAMI

FL

Zip Code
33156

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

2-3-01

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
PD
 NAME
NEUMANN, WOLFGANG
 STREET ADDRESS
601 BRICKELL KEY DR, 805
 CITY-ST-ZIP
MIAMI FL

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
SD
 NAME
SHORT, JEANETTA TERRY
 STREET ADDRESS
601 BRICKELL KEY DR 805
 CITY-ST-ZIP
MIAMI FL 33131

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
SS
 NAME
ALLEN, ROBERT N JR
 STREET ADDRESS
601 BRICKELL KEY DR, 805
 CITY-ST-ZIP
MIAMI FL

☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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:

NEUMANN WOLFGANG

11/01/01

00305 274-4600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/00)