

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000051561

1. Entity Name

FLYM, INC.

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90205 018 ***158.75

Principal Place of Business

721 SE 17TH ST.
FT. LAUDERDALE FL 33316
US

Mailing Address

721 SE 17TH ST.
FT. LAUDERDALE FL 33316-2927
US

2. Principal Place of Business

1222 NE 4TH AVE
Suite, Apt. #, etc.

3. Mailing Address

1222 NE 4TH AVE
Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

FT. LAUDERDALE, FL

4. FEI Number

65-0676682

Applied For

Not Applicable

Zip

33304

Country

U.S.

Zip

33304

Country

U.S.

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FERNANO LAMOTHE
721 SE 17TH ST.
FT. LAUDERDALE FL 33316

7. Name and Address of New Registered Agent

Name

MARC LASSIERE

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

1222 NE 4TH AVENUE

City

FT. LAUDERDALE

FL

Zip Code

33304

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.

MARC LASSIERE

(NOTE: Registered Agent signature required when reinstating)

DATE

01/14/00

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MAJOR, YVON
CITY-ST-ZIP 1736 FLEURY EST, MONTREAL, QUEBEC
CANADA, H2C-1T2Y

TITLE ☐ Delete
NAME D
STREET ADDRESS LAGUE, FRANCE P
CITY-ST-ZIP 1736 FLEURY EST, MONTREAL, QUEBEC
CANADA, H2C-1T2

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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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

Date

Daytime Phone #

YVON MAJOR JAN/14/00 (954) 763-7434

034 1999