

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
2001



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # - 99600072616

1. Corporation Name

PIPE REHAB TECHNOLOGIES MIAMI INC.

Principal Place of Business

Mailing Address

1925 Brickell Ave., Suite D206  
Miami FL 33129

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

8-30-96

4. FEI Number

65-0707118

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED  
343 ALMERIA AVE.  
Coral Gables FL 33134

10. Name and Address of New Registered Agent

81 Name

ROGER BESU

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

1925 Brickell Ave., Suite D206

83

84 City

Miami

FL

85 Zip Code

33129

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

ROGER BESU

10-19-01

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD CSILLAG ROBERT ☒ DELETE

NAME  
4120 Laguna St., Suite 200  
STREET ADDRESS  
Coral Gables FL 33134  
CITY-ST-ZIP

TITLE SDT AYCART, ANDREINA ☐ DELETE

NAME  
1925 Brickell Ave., Suite D206  
STREET ADDRESS  
Miami FL 33129  
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

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE P

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with any other like empowered.



**ROGER BESU, P.A. Attorneys at Law**

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ROGER BESU, ESQ.  
ANDERSON CASTRO, ESQ.  
ANA I. MARTINEZ, ESQ.

1925 Brickell Avenue  
Suite D-206  
Miami, Florida 33129  
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Fax: (305) 854-7550  
[www.besulaw.com](http://www.besulaw.com)

October 19, 2001

Secretary of State  
Division of Corporation  
PO Box 6327  
Tallahassee FL 32314

Re: Pipe Rehab Technologies Miami, Inc.

Dear Sirs:

Enclosed please find Annual Report for the above corporation and our check in the amount of \$150.00 for the filing fees.

Please note that our client never received the Annual Report sent to her at the Laguna St. address in Coral Gables Florida and that is why it did not get filed on time.

We are at this time changing the address and Registered Agent so that all future correspondence be sent to us.

Sincerely yours,

  
ROGER BESU

RB:vp

Enc.