

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2001 8:00 am
Secretary of State

02-21-2001 90009 010 ***150.00

DOCUMENT # P96000088268

1. Entity Name
CANYON HOLDINGS CORPORATION

Principal Place of Business

**9350 SOUTH DIXIE HIGHWAY
 SUITE 900
 MIAMI FL 33156**

Mailing Address

**9350 SOUTH DIXIE HIGHWAY
 SUITE 900
 MIAMI FL 33156**

2. Principal Place of Business

3455 NW 54th STREET

3. Mailing Address

3455 NW 54th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, Florida

City & State

MIAMI, Florida

Zip

33142

Country

U.S.A.

Zip

33142

Country

U.S.A.

4. FEI Number

65-0709006

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MARCIANO, SHELLEY
 9350 SOUTH DIXIE HWY
 STE 900
 MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name

Lilia KELLEY
 Street Address (P.O. Box Number is Not Acceptable)
3455 NW 54th STREET

City

MIAMI

FL

Zip Code
33142

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]

2/16/01

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, 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

TITLE **D** ☐ Delete
 NAME **MARK BLANK**
 STREET ADDRESS **9350 SOUTH DIXIE HIGHWAY, STE 900**
 CITY-ST-ZIP **MIAMI FL**

TITLE **PSTD** ☐ Delete
 NAME **ANDREW BLANK**
 STREET ADDRESS **9350 S DIXIE HIGHWAY STE 900**
 CITY-ST-ZIP **MIAMI FL**

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
 NAME
 STREET ADDRESS
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 CITY-ST-ZIP

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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/01

Date

(305) 633-8587

Daytime Phone #

CR2E034 (10/00)