

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000089857

1. Entity Name

RYSELL INTERNATIONAL, INC.

Principal Place of Business

13876 S.W. 56TH STREET  
SUITE 289  
MIAMI FL 33175

Mailing Address

13876 S.W. 56TH STREET  
SUITE 289  
MIAMI FL 33175-6021

2. Principal Place of Business

3. Mailing Address

9600 N.W. 25<sup>th</sup> ST

Suite, Apt. #, etc.

SUITE 3F

City & State  
MIAMI FL.

Zip

33172

Country

U.S.

City & State

MIAMI FL.

Zip

33172

Country

U.S.

City & State

MIAMI FL.

Zip

33172

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U.S.

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MIAMI FL.

Zip

33172

Country

U.S.

FILED  
Mar 23, 2000 8:00 am  
Secretary of State

03-23-2000 90041 011 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0779602

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

VALDES, J.C.  
15050 SW 45 TERR  
MIAMI FL 33185

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PVD  
REYES, ISMAEL  
13876 SW 45TH ST.  
MIAMI FL 33175

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
VALDES, ODALYS  
15050 SW 45 TERR  
MIAMI FL 33185

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
IBARRA, MAYDA G  
13876 SW 45TH ST.  
MIAMI FL 33175

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D SVP  
VALDES, JUAN C  
13876 SW 45TH ST.  
MIAMI FL 33175

☐ 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:

SIGNATURE-TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-11-00 305-221-0222

CR2E034 (9/99)