

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 28, 2000 8:00 am
Secretary of State

04-28-2000 90047 040 ***150.00

DOCUMENT # P97000006926

1. Entity Name

8520 SCHOOL HOUSE ROAD, INC.

Principal Place of Business

Mailing Address

8520 SCHOOL HOUSE RD
MIAMI FL 33143
US

P. O. BOX 141102
CORAL GABLES FL 33114-1102
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0731523

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MASVIDAL, MERCEDES
1401 PONCE DE LEON BLVD
#402
CORAL GABLES FL 33134

Name

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

201 Alhambra Circle

Suite 1401

City

Coral Gables

FL

Zip Code

33134

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

Mercedes Masvidal (Mercedes Masvidal)

4/20/00

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 PD
NAME MASVIDAL, MERCEDES
STREET ADDRESS 1401 PONCE DE LEON BLVD #402
CITY-ST-ZIP CORAL GABLES FL 33134 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 201 Alhambra Circle, Suite 1401
CITY-ST-ZIP Coral Gables, FL 33134

TITLE VP
NAME MASVIDAL, RAUL
STREET ADDRESS 1401 PONCE DE LEON BLVD #402
CITY-ST-ZIP CORAL GABLES FL 33134 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 201 Alhambra Circle, Suite 1401
CITY-ST-ZIP Coral Gables, FL 33134

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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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:

Mercedes Masvidal (Mercedes Masvidal)

4/20/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)