

FILED
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Secretary of State

05-05-2003 90108 022 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P97000047022

1. Entity Name
PREM INTERNATIONAL, INC.



70055116

Principal Place of Business
8412 NW 70TH STREET
MIAMI, FL 33166 US

Mailing Address
~~8412 NW 70TH STREET~~
MIAMI, FL 33166 US



2. Principal Place of Business

3. Mailing Address C/O I. Monteagudo
8180 NW 36 Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 230

City & State

City & State
Miami, FL

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0765687

Applied For
Not Applicable

Zip

Country

Zip
33166

Country
U.S.

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

CRITTENDEN, ISELA
9701 S W. 72 CT.
MIAMI, FL 33166

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and (if applicable)

(NOTE: Registered Agent signature required when appointing)

DATE

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	YANEZ, RAUL	8412 NW 70TH STREET	MIAMI, FL 33166				
VPD	KELLY, LUCIANA	8412 NW 70TH STREET	MIAMI, FL 33166				
SD	KELLY, MAGDALENA	8412 NW 70TH STREET	MIAMI, FL 33166				
TD	LECNA, NORMA	8412 NW 70TH STREET	MIAMI, FL 33166				

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X

SIGNATURE AND TYPE, PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03

Cynthia P. Hunt

CP2021034 (10/02)