

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000056485

1. Entity Name

VIDAL, REYNARDUS & MOYA (FLORIDA), INC.

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90075 028 ***158.75

Principal Place of Business

9100 S. DADELAND BLVD
#904
MIAMI FL 33156
US

Mailing Address

VIDAL PARTNERSHIP,
(FLORIDA) INC.
DAVID GRONSBELL & CO.
117 EAST 38TH STREET
NEW YORK NY 10016-2601
228 E. 45th ST.
NEW YORK, NY 10017

2. Principal Place of Business

9100 S. DADELAND BLVD.

3. Mailing Address

228 E. 45th ST.

Suite, Apt. #, etc.

*904

Suite, Apt. #, etc.

City & State

MIAMI FL.

City & State

NEW YORK N.Y.

4. FEI Number

65-0838736

Applied For

Not Applicable

Zip

33156

Country

U.S.A.

Zip

10016

Country

U.S.A.

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

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

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 ☒ Delete
NAME P
STREET ADDRESS REYNARDUS, JORGE E.
CITY-ST-ZIP 201 EAST 77 ST
NEW YORK NY 10021

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

TITLE ☒ Delete
NAME T
STREET ADDRESS MOYA, JORGE R.
CITY-ST-ZIP 134 GLENWOOD RD.
ENGLEWOOD NJ 07631

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

TITLE ☐ Delete
NAME S
STREET ADDRESS VIDAL, MANOLO
CITY-ST-ZIP TROY TOWERS #1510
UNION CITY NJ 07087

TITLE ☒ Change ☐ Addition
NAME PRESIDENT
STREET ADDRESS VIDAL, MANOLO
CITY-ST-ZIP TROY TOWERS #1510 228. EAST 45TH ST
UNION CITY, N.J. 07087 NY, NY 10017

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)