

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000062263

1. Entity Name

D & Y INTERNATIONAL ENTERPRISES, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90008 021 ***163.75

Principal Place of Business

15132 N.W. 7 CT.
PEMBROKE PINES FL 33028
US

Mailing Address

15132 N.W. 7 CT.
PEMBROKE PINES FL 33028
US

2. Principal Place of Business

21011 JOHNSON ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

108

City & State
Pembroke Pines FL

City & State

4. FEI Number

65-0768578

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BELTRAN, WILLIAM
15132 N.W. 7 CT.
PEMBROKE PINES FL 33028

7. Name and Address of New Registered Agent

Name BELTRAN, WILLIAM

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

15132 N.W. 7 CT

City Pembroke Pines

FL

Zip Code 33028

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 *William Beltran* PD William Beltran.

(NOTE: Registered Agent signature required when reinstating)

02/04/00
DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☒

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 ☒ \$5.00 May Be
Trust Fund Contribution. Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME BELTRAN, WILLIAM
STREET ADDRESS 15132 N.W. 7 CT.
CITY-ST-ZIP PEMBROKE PINES FL 33028

TITLE VP ☒ Delete
NAME BELTRAN-LUTH, CLAUDIA
STREET ADDRESS WEISSPFENNIG WEG 6
CITY-ST-ZIP 81825 MUNICHEN GERMANY

TITLE S/D ☒ Delete
NAME MARTINEZ, DEBORAH
STREET ADDRESS 15132 N.W. 7 CT.
CITY-ST-ZIP PEMBROKE PINES FL 33028

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 S/D BELTRAN, WILLIAM
STREET ADDRESS 15132 N.W. 7 CT
CITY-ST-ZIP Pembroke Pines FL 33028

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

TITLE ☐ Change ☐ Addition
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)(f), 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: *William Beltran* William Beltran

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/04/00
Date

(954) 437-8119
Daytime Phone #

CR2E034 (9/99)