

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000066240

1. Entity Name

PH INTERNATIONAL GROUP, INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90019 026 ***158.75

Principal Place of Business: 12571 SW 38 TERRACE, MIAMI FL 33175, US
 Mailing Address: POST OFFICE BOX 83-6209, MIAMI FL 33283-6209, US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: 12571 SW 38 TERRACE, Miami, FL, City & State: 33175

4. FEI Number: 65-0774753
 Applied For: Not Applicable:

Zip: Country: USA

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 AUERBACH, MARC H ESQ.
 100 S.E. 2ND STREET
 28TH FLOOR
 MIAMI FL 33131

7. Name and Address of New Registered Agent
 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: _____ DATE: _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

11. OFFICERS AND DIRECTORS	
TITLE: PT NAME: SURIS, JOSE M STREET ADDRESS: 12571 SW 38 TERRACE CITY-ST-ZIP: MIAMI FL 33175	<input type="checkbox"/> Delete
TITLE: V NAME: SURIS, TAMIRA STREET ADDRESS: 12571 SW 38 TERRACE CITY-ST-ZIP: MIAMI FL 33175	<input checked="" type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: Vice President NAME: Jose M. Suris, Sr. STREET ADDRESS: 12571 SW 38 TERRACE CITY-ST-ZIP: MIAMI, FL 33175	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: President NAME: HERBERTO SARDINAS STREET ADDRESS: 12571 SW 38 TERRACE CITY-ST-ZIP: MIAMI, FL 33175	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: Treasurer NAME: Gregorio Rodriguez STREET ADDRESS: 12571 SW 38 TERRACE CITY-ST-ZIP: MIAMI, FL 33175	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> 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: Jose M. Suris Sr. Vice President Date: 4/28/00 Daytime Phone #: (305) 552-7408

CR2E034 (9/99)