

2000 UNIFORM BUSINESS REPORT. (UBR)

DOCUMENT # **P97000075664**

1. Entity Name

ALLIN INTERNATIONAL USA, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

5475 N.W. 72ND AVENUE

Suite, Apt. #, etc.

3. Mailing Address

5475 N.W. 72ND AVENUE

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33166

Country

U.S.A.

City & State

MIAMI, FL

Zip

33166

Country

U.S.A.

6. Name and Address of Current Registered Agent

4. FEI Number

65-0779221

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

GERMAN A. GODOY

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

5475 N.W. 72ND AVENUE

City

MIAMI

FL

Zip Code
33166

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

GERMAN A. GODOY / D. PRESIDENT

04/15/00

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

TITLE **D. PRESIDENT** ☐ Delete

NAME **GERMAN A. GODOY**

STREET ADDRESS **5475 N.W. 72ND AVE.**

CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **TREASURER** ☐ Delete

NAME **CAROLINA HOCH**

STREET ADDRESS **5475 N.W. 72ND AVE.**

CITY-ST-ZIP **MIAMI, FL 33166**

TITLE ☐ Delete

NAME ☐ Delete

STREET ADDRESS ☐ Delete

CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete

STREET ADDRESS ☐ Delete

CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete

STREET ADDRESS ☐ Delete

CITY-ST-ZIP ☐ Delete

TITLE ☐ Delete

NAME ☐ Delete

STREET ADDRESS ☐ Delete

CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

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:

GERMAN A. GODOY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/00

Date

(754) 258-3018

Daytime Phone #

CR2E034 (9/99)