2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2001 8:00 am Secretary of State DOCUMENT # P97000087016 AMBIENT ENVIRONMENTAL, INC. 02-01-2001 90051 014 ***150.00 Principal Place of Business Mailing Address 9601-FOUNTAINEBLEAU-BOULEVARD 55 WEST 39TH ST APARTMENT-603 12TH FLR MIAMI FL NEW YORK NY 10018 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0788771 iam Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent amorra CHAMORRO, ARMANDO Street Address (P.O. Box Number is Not Acceptable) 9601 FOUNTAINEBLEAU BOULEVARD **APARTMENT 603** MIAMI FL City iami 8. The above named entity submits this statement of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Delete TITLE Change Change ☐ Addition Chamorro, Armando CHAMORRO, ARMANDO NAME NAME 1877 South West 25th Street STREET ADDRESS 9601 FOUNTAINEBLEAU BOULEVARD, #603 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Miami. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LEITNER, JOHN NAME STREET ADDRESS 750 RUSHMORE AVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MAMARONECK NY 10543 TITLE ☐ Delete TITLE ☐ Change ☐ Addition ESPOSITO, WILLIAM NAME NAME STREET ADDRESS 77 5TH AVE STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10011** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 a other the empowered. SIGNATURE: Daytime Phone