

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000091542

1. Entity Name

VOLUKAI CENTER FOR MIND & BODY, INC.

FILED

Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90297 011 ***150.00

Principal Place of Business

8201 NORTH WEST 66TH STREET
SUITE 3
MIAMI FL 33166

Mailing Address

8201 NORTH WEST 66TH STREET.
SUITE 3
MIAMI FL 33166

645252



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9882 SW 223 TERRACE

Suite, Apt. #, etc.

3. Mailing Address

9882 SW 223 TERRACE

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number 65-0789110

Applied For

Not Applicable

Zip

Country

33190-1582

Zip

Country

33190-1582

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CUNHA, ILIANA
8201 NORTH WEST 66TH STREET
SUITE 3
MIAMI FL 33166

7. Name and Address of New Registered Agent

Name

AMARO ROCHA

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

9882 SW 223 TERRACE

City

MIAMI

FL

Zip Code

33190-1582

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.

AMARO ROCHA

(NOTE: Registered Agent's signature required when reinstating)

04/20/01

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, 2001 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 PSD
NAME ROCHA, AMARO ☐ Delete
STREET ADDRESS 8201 NORTH WEST 66TH STREET SUITE 3
CITY-ST-ZIP MIAMI FL 33166

TITLE VTD
NAME CUNHA, ILIANA ☐ Delete
STREET ADDRESS 8201 NORTH WEST 66 STREET SUITE 3
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 PSD ☒ Change ☐ Addition
NAME ROCHA, AMARO
STREET ADDRESS 9882 SW 223 TERRACE
CITY-ST-ZIP MIAMI, FL 33190-1582

TITLE VTD ☒ Change ☐ Addition
NAME CUNHA, ILIANA
STREET ADDRESS 9882 SW 223 TERRACE
CITY-ST-ZIP MIAMI FL 33190-1582

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROCHA, AMARO

Date

4/20/01

Daytime Phone #

305-597-4511

CR2E034 (10/00)