

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P97000093121

1. Entity Name

C & S INTERNATIONAL GROUP, INC.

Principal Place of Business

11440-SW-56-Ste
Miami-FL-33165

Mailing Address

11440-SW-56-Ste
Miami-FL-33165

2. Principal Place of Business

9745 Miller Drive

Suite, Apt. #, etc.

3. Mailing Address

9745 Miller Drive

Suite, Apt. #, etc.

City & State

Miami Florida

City & State

Miami Fl

Zip

33165

Country

US

Zip

33165

Country

US

4. FEI Number

65-0793567

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Carlos Macedo
11440-SW-56-Ste
Miami-FL-33165--

Name

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

9745 Miller Drive

City

Miami

Zip Code
FL 33165

7. Name and Address of New Registered Agent

SIGNATURE

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
Juan Lequerica
11440 SW 56 St
Miami FL 33165

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
Carlos Macedo
9745 Miller Drive
Miami FL 33165

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
Jaime Leon
11440 SW 56 St
Miami FL 33165

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

S
Monica Macedo
9745 Miller Drive
Miami FL 33165

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
Monica Rodriguez
114440 SW 56 St
Miami FL 33165

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

200004430072--9
-06/19/01--01075--011
***300.00 ***300.00

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

201-25-AR
10.00 - ARACTS

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

88.75- ARS/UP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Carlos Macedo, Pcos, 5/29/01 (308) 412-0829

Date

Daytime Phone #

CR2E034 (9/99)

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C & S INTERNATIONAL GROUP, INC.

CONFIDENCE & SECURITY * CONFIANZA & SEGURIDAD



Miami, May 30, 2001

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P. O. Box 6327
Tallahassee, FL 32314

Ref.- UBR
Reinstatement Section

Gentleman:

Enclosed please find our (UBR) Uniform Business Report, for year 2001, including our check for \$300.00 (Three Hundred and 00/100 Dollars) with our check # 1090, to cover the fees for annual reports of years 2000 and 2001.

The reason for the delay is that during the early months of last year I had a heart attack and I was unable to take care of the business and I let my daughter to help me in doing the paper work along with other members of the family.

I learn that my corporation was dissolve due to a non payment of the annual report true my bank yesterday, in this report we find that maybe one of the reasons for non filing on time was because the address is incorrect and probably we have never received the form to do this report.

I am appealing to you to process this annual report and please accept my apologies for the tardiness, I am also requesting the late fees to be wave due to my temporary incapacity to work and take care of my business personally.

Thank you in advance for your consideration and help to solve this matter, I will be very grateful if my request is granted since this will help me to get back to work.

Sincerely,

[Handwritten signature of the sender, a man with a mustache, followed by a large handwritten circle.]

9745 MILLER DRIVE, MIAMI FL 33165

Tel. 305/412-0829 * Fax 305/412-0864

ACCOUNTING - NOTARY PUBLIC