

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000094509

1. Entity Name

CYBER ELEMENTS CORPORATION

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90190 030 ***158.75

Principal Place of Business

Mailing Address

260 EAST 10 STREET
MIAMI FL 33010

260 EAST 10 STREET
HIALEAH FL 33010-4130

2. Principal Place of Business

6175 N.W. 167 Street

Suite, Apt. #, etc.
G16

City & State

Miami, Fl.

3. Mailing Address

6175 N.W. 167 Street

Suite, Apt. #, etc.
G16

City & State

Miami, Fl.

Zip
33015

Country
USA

Zip
33015

Country
USA

4. FEI Number

65-0793145

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROLA, MONICA
95912 FOUNTAINEBLEAU BLVD
#312
MIAMI FL 33172

7. Name and Address of New Registered Agent

Name

Van Riel, Alba G.

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

6763 N.W. 182 Street - Unit 104

City

Miami

FL

Zip Code
33015

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

Alba G. Van Riel

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 ☐ Delete
NAME P
STREET ADDRESS QUESADA, WALTER O
CITY-ST-ZIP 9591 FOUNTAINEBLEAU BLVD #312
MIAMI FL 33172

TITLE ☐ Delete
NAME S
STREET ADDRESS QUESADA, MONICA ROCA
CITY-ST-ZIP 9591 FOUNTAINEBLEAU BLVD #312
MIAMI FL 33172

TITLE ☐ Delete
NAME T
STREET ADDRESS QUESADA, MONICA ROCA
CITY-ST-ZIP 9591 FOUNTAINEBLEAU BLVD #312
MIAMI FL 33172

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 ☒ Change ☐ Addition
NAME
STREET ADDRESS 6763 N.W. 182 Street - Unit 104
CITY-ST-ZIP Miami, Florida 33015

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6763 N.W. 182 Street, Unit 104
CITY-ST-ZIP Miami, Florida 33015

TITLE ☒ Change ☐ Addition
NAME Quesada, Walter O
STREET ADDRESS 6763 N.W. 182 Street - Unit 104
CITY-ST-ZIP Miami, Florida 33015

TITLE ☐ Change ☒ Addition
NAME Vice President
STREET ADDRESS Roca-Quesada, Monica
CITY-ST-ZIP 6763 N.W. 182 Street, Unit 104
Miami, Florida 33015

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

Walter O. Quesada

Date

Daytime Phone #

4/18/00

CR2E034 (9/99)