4/3/

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

04-03-2000 90203 048 ***158.75

DOCUMENT # P97000105310 (1)

Entity Name
BLACKBURN & BEZERRA CORPORATION

Principal Place of Business
538 Collins Ave. #315
Miami Beach, FL 33141

Mailing Address
6538 Collins Ave. #315
Miami Beach, FL 33141

[redacted]

402730

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 4310 SHERIDAN ST
Suite, Apt. #, etc.: 202
City & State: HOLLYWOOD, FL
Zip: 33021 Country: BROWARD

3. Mailing Address: 4310 SHERIDAN ST
Suite, Apt. #, etc.: 202
City & State: HOLLYWOOD, FL
Zip: 33021 Country: BROWARD

4. FEI Number: 65-0802648 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Burton & Company, P.A.
4310 Sheridan Street, Suite 202
Hollywood, FL 33021

7. Name and Address of New Registered Agent

Name: ANDRE S. BURTOK
Street Address (P.O. Box Number is Not Acceptable): 4310 SHERIDAN ST
SUITE 202
City: HOLLYWOOD FL Zip Code: 33021

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] 4/1/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	PSD	☐ Delete
NAME	Bezerra, Euripedes A	
STREET ADDRESS	6538 Collins Ave. #315	
CITY-ST-ZIP	Miami Beach, FL 33141	
TITLE	VTD	☐ Delete
NAME	Blackburn, Fletcher	
STREET ADDRESS	6538 Collins Ave. #315	
CITY-ST-ZIP	Miami Beach, FL 33141	
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (9/99)

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: X [signature] XX 3-28-00 305-864-7504
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #