

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 20, 2001 8:00 am**  
**Secretary of State**

02-20-2001 90067 035 \*\*\*158.75

**DOCUMENT # P98000000987**

1. Entity Name  
**MIAMI INTERNATIONAL AIRPORT CONSULTANTS, INC.**

Principal Place of Business 5757 NW 11TH STREET, STE 160 MIAMI FL 33126-2035	Mailing Address 5757 NW 11TH STREET, STE 160 MIAMI FL 33126-2035
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00018867



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10305 NW 41 Street Suite, Apt. #, etc. Suite 111 City & State Miami, Florida	3. Mailing Address 10305 NW 41 Street Suite, Apt. #, etc. Suite 111 City & State Miami, Florida
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4. FEI Number 65-0819952	Applied For <input type="checkbox"/> Not Applicable
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Zip 33178	Country Dade	Zip 33178	Country Dade
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5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**ROCHETEAU, RALPH**  
**5757 NW 11TH STREET, STE 160**  
**MIAMI FL 33126-2035**

7. Name and Address of New Registered Agent  
 Name  
**Ralph Rocheteau**  
 Street Address (P.O. Box Number is Not Acceptable)  
**10305 NW 41 Street**  
**Suite 111**  
 City  
**Miami, Florida** **FL** Zip Code  
**33178**

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 *Ralph Rocheteau* *Ralph Rocheteau* *13 Feb 2001*  
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, 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 NAME STREET ADDRESS CITY-ST-ZIP	PD ROCHETEAU, RALPH <del>5757 NW 11TH STREET, STE 160</del> <del>MIAMI FL 33126-2035</del> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD ARMENTA, ROSARIO <del>5757 NW 11TH STREET, STE 160</del> <del>MIAMI FL 33126</del> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ralph Rocheteau <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10305 NW 41 Street Suite 111, Miami, Florida 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rosario Armenta <input type="checkbox"/> Change <input type="checkbox"/> Addition 10305 NW 41 Street, Suite 111 Miami, Florida 33178
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Ralph Rocheteau* *Ralph Rocheteau* February 13, 2001  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)