

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 18, 2000 8:00 am**  
**Secretary of State**

07-18-2000 90089 046 \*\*\*150.00

**DOCUMENT # P98000010068**

1. Entity Name  
**VIBA INTERNATIONAL, INC.**

Principal Place of Business      Mailing Address  
 121 S. THIRD STREET      121 S. THIRD STREET  
 LANTANA FL 33462      LANTANA FL 33462

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MONDO, TERRY LEE**  
**121 S. THIRD STREET**  
**LANTANA FL 33462**

7. Name and Address of New Registered Agent

Name

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

City      **FL**      Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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          | <b>D</b> <input type="checkbox"/> Delete |
| NAME           | <b>MONDO, TERRY LEE</b>                  |
| STREET ADDRESS | <b>121 S. THIRD STREET</b>               |
| CITY-ST-ZIP    | <b>LANTANA FL 33462</b>                  |
| TITLE          | <input type="checkbox"/> Delete          |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Delete          |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Delete          |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |
| TITLE          | <input type="checkbox"/> Delete          |
| NAME           |  |
| STREET ADDRESS |  |
| CITY-ST-ZIP    |  |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |   |
|----------------|---|
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |   |
| STREET ADDRESS |   |
| CITY-ST-ZIP    |   |
| TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> 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: **TERRY LEE MONDO**      **MONDO**      7-10-00      561-586-4507  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (5/00)

P47 000010068

AD06811

VIBA INTERNATIONAL, INC.  
121 S. THIRD STREET  
LANTANA, FL 33462-2853  
561-586-4507

July 11, 2000

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Division of Corporations  
Uniform Business Report Filings  
P O Box 1500  
Tallahassee, FL 32302-1500

RE: 2<sup>nd</sup> Notice

Dear Bureau:

Our office received this second notice July 7, 2000; please know that we never received the first one. Our company has paid all taxes State and Federal in the time they were due and most of the time before.

I called your office on the 10<sup>th</sup> of July and was instructed to mail the enclosed report as soon as possible with a check in the amount of \$150.00.

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If you need any further information or would like to take to me personally about this matter, I would be happy to discuss it.

Thank you in advance for any help in getting this amount accepted.

Yours truly,

*Terry Mondo*

Terry Mondo  
President