

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000010639

1. Entity Name

POINT IMPORT & EXPORT, INC.

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90102 001 ***150.00

Principal Place of Business

8288 NW 56TH ST
 MIAMI FL 33166

Mailing Address

8288 NW 56TH ST
 MIAMI FL 33166-2344

2. Principal Place of Business

7852 N.W. 71 STREET

Suite, Apt. #, etc.

3. Mailing Address

7852 N.W. 71 STREET

Suite, Apt. #, etc.

City & State

MIAMI, FL 33166-2344

City & State

MIAMI, FL 33166-2344

Zip

Country

Zip

Country

4. FEI Number

65-0810849

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MACDANIEL, JOHN M ESQ
ONE BISCAYNE TOWER, STE 2975
TWO SOUTH BISCAYNE BLVD
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

PISCIOTTANO, ANTONIO C.

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

11274 NW 50TH TERRACE

City

MIAMI

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

PISCIOTTANO, ANTONIO C.

4/25/2000

Signature, type 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	P	<input type="checkbox"/> Delete
NAME	PISCIOTTANO, ANTONIO C	
STREET ADDRESS	8288 NW 56ST	
CITY-ST-ZIP	MIAMI FL 33166	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	11274 NW 50TH TERRACE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VICEPRESIDENT/TREASURER
STREET ADDRESS	PISCITTANO, MARIA DE LOURDES
CITY-ST-ZIP	11274 NW 50TH TERRACE
	MIAMI, FL 33178
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:

PISCIOTTANO, ANTONIO C.

4/25/2000

(305)471-5161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #