

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000014090

1. Entity Name

ARMELLA INTERNATIONAL CONSULTANTS, INC.

FILED
Mar 20, 2000 8:00 am
Secretary of State

03-20-2000 90064 010 ***150.00

Principal Place of Business

210 174 STREET SUITE 517
NORTH MIAMI BEACH FL 33160

Mailing Address

210 174 STREET SUITE 517
NORTH MIAMI BEACH FL 33160-3337

2. Principal Place of Business

1008 JEFFERSON AVE

Suite, Apt. #, etc.

302

3. Mailing Address

1008 JEFFERSON AVE

Suite, Apt. #, etc.

302

City & State

MIAMI BEACH FLORIDA

City & State

MIAMI BEACH FLORIDA

Zip

33139

Country

US

Zip

33139

Country

U.S.

4. FEI Number

65-0824711

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DELA FUENTE, FRANCES S

5200 BLUE LAGOON DRIVE SUITE 600

MIAMI FL 33126

7. Name and Address of New Registered Agent

Name

ZENAIDA ARMELLA

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

1008 JEFFERSON AVE

SUITE # 302

City

MIAMI BEACH

FL

Zip Code

33139

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

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 D
STREET ADDRESS ARMELLA, JOSE A
CITY-ST-ZIP 210 174 STREET SUITE 517
NORTH MIAMI BEACH FL 33160

TITLE ☐ Delete
NAME D
STREET ADDRESS ARMELLA, ZENAIDA
CITY-ST-ZIP 210 174 STREET SUITE 517
NORTH MIAMI BEACH FL 33160

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 D
STREET ADDRESS ARMELLA, JOSE A
CITY-ST-ZIP 1008 JEFFERSON AVE. SUITE #302
MIAMI BEACH, FLORIDA 33139

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS ARMELLA ZENAIDA
CITY-ST-ZIP 1008 JEFFERSON AVE. SUITE #302
MIAMI BEACH, FLORIDA 33139

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an other like empowered.

SIGNATURE:

ZENAIDA ARMELLA

3/14/2000 (305) 532-3008

Date

Daytime Phone #