

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000022215

1. Entity Name

ONE TO ONE MANAGEMENT CONSULTING, INC.

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

04-17-2000 90044 034 ***150.00

Principal Place of Business

Mailing Address

PO BOX 915079
LONGWOOD FL 32791-6231

PO BOX 915079
LONGWOOD FL 32791-5079

2. Principal Place of Business

1500 Ocean Drive

3. Mailing Address

1500 Ocean Drive

Suite, Apt. #, etc.

404

Suite, Apt. #, etc.

404

City & State

Miami Beach, Florida

City & State

Miami Beach, Florida

Zip

33139

Country

USA

Zip

33139

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3498287

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARBUCIAS, MIRMA J
602 SAN SEBASTIAN PRADO
ALTAMONTE SPRINGS FL 32714-2239

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME ARBUCIAS, MIRMA J
STREET ADDRESS 602 SAN SEBASTIAN PRADO
CITY-ST-ZIP ALTAMONTE SPGS FL 32714-2239

TITLE PD ☒ Change ☐ Addition
NAME ARBUCIAS, mirma J.
STREET ADDRESS 1500 OCEAN DRIVE #401
CITY-ST-ZIP Miami Beach, FL. 33139

TITLE VD ☐ Delete
NAME ARBUCIAS, ANTHONY
STREET ADDRESS 602 SAN SEBASTIAN PRADO
CITY-ST-ZIP ALTAMONTE SPGS FL 32714-2239

TITLE VD ☒ Change ☐ Addition
NAME ARBUCIAS, ANTHONY
STREET ADDRESS 1500 OCEAN DRIVE #401
CITY-ST-ZIP Miami Beach, FL. 33139

TITLE S ☐ Delete
NAME ARBUCIAS, JOYCE
STREET ADDRESS 602 SAN SEBASTIAN PRADO
CITY-ST-ZIP ALTAMONTE SPGS FL 32714-2239

TITLE S ☒ Change ☐ Addition
NAME ARBUCIAS, Joyce
STREET ADDRESS 602 San Sebastian Prado
CITY-ST-ZIP Altamonte Springs, FL. 32714

TITLE TD ☐ Delete
NAME MORALES, IBRA B
STREET ADDRESS 602 SAN SEBASTIAN PRADO
CITY-ST-ZIP ALTAMONTE SPGS FL 32714-2239

TITLE TD ☒ Change ☐ Addition
NAME MORALES, IBRA B
STREET ADDRESS 1500 Ocean Drive #402
CITY-ST-ZIP Miami Beach, FL. 33139

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MIRMA J. ARBUCIAS (PRESIDENT)

4/11/00 (305) 695-9641