

2001 UNIFORM BUSINESS REPORT (UBR)

192

FILED
Mar 28, 2001 8:00 am
Secretary of State

03-08-2001 90064 015 ***158.75
 03-28-2001 90077 007 ****61.25

DOCUMENT # 998000036045 ✓
 1. Entity Name
ENERGY INTERNATIONAL, INC.

| | |
|--|--|
| Principal Place of Business | Mailing Address |
| 1983 NW 88th Court Suite #304 Miami, FL 33172 | 1983 NW 88th Ct Ste 304 Miami, FL 33172 |

| | |
|--------------------------------|---------------------|
| 2. Principal Place of Business | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |

DO NOT WRITE IN THIS SPACE

| | |
|---------------|----------------|
| 4. FEI Number | Applied For |
| 65-0839360 | Not Applicable |

| | | |
|--|--|---------------------------------------|
| 5. Certificate of Status Desired | <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent | |
| Cline, Harry S 625 Court Street Suite 200 Clearwater, FL 33756 | 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 use 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) <input type="checkbox"/> | 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. <input type="checkbox"/> | \$5.00 May Be Added to Fees |
|---|---|---|------------------------------------|

| 11. OFFICERS AND DIRECTORS | |
|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete |
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| 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 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| FM Hall, Brett D. 1983 NW 88th Court Miami, FL 33172 | |
| 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: Brett D. Hall 3/22/01 (305) 593-5085
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)

2001- UNIFORM BUSINESS REPORT (UBR)

2 of 2

DOCUMENT # **P98000036045 ✓**

1. Entity Name
Energy International;
1983 N.W. 88th Court Suite 304
Miami, FL 33172

Principal Place of Business Mailing Address
1983 NW 88th Court Ste 304
Miami, FL 33172

2. Principal Place of Business
1983 NW 88th Court

3. Mailing Address

Suite, Apt. #, etc.
304

Suite, Apt. #, etc.

City & State
Miami, FL 33172

City & State

Zip
33172

Country
USA

Zip

Country

4. FEI Number
65-0839360

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

00022837

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~ENERGY INTERNATIONAL
 1983 NW 88th Court Suite 304
 Miami, FL 33172~~

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 _____
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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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|--------------------------------|--|
| TITLE NAME | James P. Fenton CD | <input type="checkbox"/> Delete |
| STREET ADDRESS | 1983 NW 88th Court Suite 304 | |
| CITY-ST-ZIP | Miami, FL 33172 | |
| TITLE NAME | Hector Bernal P | <input type="checkbox"/> Delete |
| STREET ADDRESS | 1983 NW 88th Court Suite 304 | |
| CITY-ST-ZIP | Miami, FL 33172 | |
| TITLE NAME | Jefferson N. Powell Jr. S | <input type="checkbox"/> Delete |
| STREET ADDRESS | 1200 Brickell Avenue Suite 305 | |
| CITY-ST-ZIP | Miami, FL 33131 | |
| TITLE NAME | Jairo Piedrahita V | <input type="checkbox"/> Delete |
| STREET ADDRESS | 1983 NW 88th Court Suite 304 | |
| CITY-ST-ZIP | Miami, FL 33172 | |
| TITLE NAME | Jairo Gonzalez V | <input type="checkbox"/> Delete |
| STREET ADDRESS | 1983 NW 88th Court Suite 304 | |
| CITY-ST-ZIP | Miami, FL 33172 | |
| TITLE NAME | Joel Berlant V | <input checked="" type="checkbox"/> Delete |
| STREET ADDRESS | 1983 NW 88th Court Suite 304 | |
| CITY-ST-ZIP | Miami, FL 33172 | |

| | | |
|----------------|--|---|
| TITLE NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE NAME | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 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)(f), 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: **3/1/01** Daytime Phone #: **(305) 593-5085**

CR2E034 (11/00)