

2000 UNIFORM BUSINESS REPORT (UBR)

082900

DOCUMENT # P 98 000036204

1. Entity Name  
DEMBLANS INC

FILED  
00 AUG 30 PM 12:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
200 Biscayne Blvd. Way Apt 9 J  
Miami - FL 33131

Mailing Address  
200 Biscayne Blvd way  
Apt 9 J  
Miami - FL 33131

2. Principal Place of Business  
200 Biscayne Blvd. way  
Suite, Apt. #, etc.  
Apt 9 J  
City & State  
Miami - FLORIDA  
Zip  
33131  
Country  
United States

3. Mailing Address  
200 Biscayne Blvd way  
Suite, Apt. #, etc.  
Apt 9 J  
City & State  
Miami - FLORIDA  
Zip  
33131  
Country  
UNITED STATES

DO NOT WRITE IN THIS SPACE

4. FEI Number  
65-0356255

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  
Name  
JUAN CARLOS ESPINOSA OJITOS  
Street Address (P.O. Box Number Not Acceptable)  
200 Biscayne Blvd way, Apt 9 J  
City  
Miami  
FL  
Zip Code  
33131

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  
Margareta  
Colombia M. Mejia  
08/22/00  
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	President	<input type="checkbox"/> Delete	TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COLOMBIA MARGARITA MEJIA		NAME	JUAN CARLOS ESPINOSA OJITOS	
STREET ADDRESS	200 Biscayne Blvd way Apt 9 J		STREET ADDRESS	200 Biscayne Blvd. way, Apt 9 J	
CITY-ST-ZIP	Miami - Florida 33131		CITY-ST-ZIP	Miami - Florida 33131	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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  
Margareta  
Colombia M. Mejia  
08/22/00 (305) 5103250  
Signature and typed or printed name of signing officer or director Date Daytime Phone #