

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90086 026 ***150.00

DOCUMENT # P98000037290

1. Entity Name
 SOUTH AMERICAN OCEAN TEAM, INC.

Principal Place of Business **Mailing Address**

2875 NE 191 ST. PH3 2875 NE 191 ST. PH3
 AVENTURA, FL 33180 AVENTURA, FL. 33180

2. Principal Place of Business **3. Mailing Address**

OCEAN DRIVE (SOUTH BEACH) 3061 SW 142 AV. 1
 Suite, Apt. #, etc. MIAMI FLORIDA 33175

City & State **City & State**

Zip **Country** **Zip** **Country**

4. FEI Number **Applied For**

65-0832986 ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROTH, LEONARDO A.
 2875 NE 191 ST, PH3
 AVENTURA, FL. 33180

7. Name and Address of New Registered Agent

Name

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

City **FL** **Zip Code**

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. ☐ **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**

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PD PAVLICICH, JULIO CESAR 2875 NE 191 ST. PH3 AVENTURA, FL. 33180	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INCONTRATO STELLA MARIS 2875 NE 191 ST. PH3 AVENTURA, FL. 33180
V - FARINA, LUIS MARIA 2875 NE 191 ST, PH3 AVENTURA, FL. 33180	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
SD FERNANDEZ, CARLOS NESTOR AV. LIBERTAD 1101, CANUELAS 181 BUENOS AIRES-ARGENTINA	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TD ZUFIAURRE, ELSA BEATRIZ FLORIDA 614, CANUELAS 1814 BUENOS AIRES-ARGENTINA	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
D NILDA, CATALINA S 2875 NE 191 ST, PH3 AVENTURA, FL. 33180	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition
D PAVLICICH, JORGE 2875 NE 191 ST, PH3 AVENTURA, FL. 33180	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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** **4-11-2000** **Date** **Daytime Phone #**