## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED May 01, 2001 8:00 am Secretary of State DOCUMENT # **P98000051841** KUNDU CORPORATION 05-01-2001 90098 032 \*\*\*150.00 Principal Place of Business Mailing Address 4232 SW 75TH AVE 4232 SW 75TH AVE MIAMI FL 33155 MIAMI FL 33155 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0850964 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BLASINI, RODRIGO** Street Address (P.O. Box Number is Not Acceptable) 4232 SW 75TH AVE MIAMI FL 33155 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. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. **OFFICERS** AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE PREGIDENT TITLE ☐ Delete ■ Addition BLADINI, RODRIGO BLASINIA: RODRIGO NAME NAME 4232 SW 75TH AVE STREET ADDRESS 4232 SW 75TH AVE STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33155** CITY-ST-ZIP MIAMI FL 33155 TITLE GENERAL MANAGER ☐ Delete TITLE NAME KELLE KEELER NAME STREET ADDRESS STREET ADDRESS 4232 OU TSTH AVE CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33155 TITLE ☐ Delete T(T) F Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 supplier of the corporation or the receiver of 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.