

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000053685

1. Entity Name

NETCOM LATIN AMERICA, INC.

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

01-26-2000 90130 042 ***150.00

Principal Place of Business

Mailing Address

714 HERITAGE DRIVE
WESTON FL 33326

714 HERITAGE DRIVE
WESTON FL 33326-4539

2. Principal Place of Business

10242 NW 47 Street

3. Mailing Address

SAME

Suite, Apt. #, etc.

42

Suite, Apt. #, etc.

"

City & State

Fort Lauderdale, FL

City & State

"

4. FEI Number

65-0844810

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

ORJUELA, MARIA
714 HERITAGE DRIVE
WESTON-FL-33326

Name

RANIERI A. MESTRONI

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

10242 NW 47th Street, Suite 42

City Fort Lauderdale

FL

Zip Code 33351

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

JAN-20-2000

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

TITLE ☒ Delete
NAME ORJUELA, MARIA
STREET ADDRESS 714 HERITAGE DRIVE
CITY-ST-ZIP WESTON FL 33326

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☒ Add
NAME MR. RANIERI A. MESTRONI
STREET ADDRESS 10242 NW 47 St. Suite 42
CITY-ST-ZIP FORT LAUDERDALE, FL, 33351

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

TITLE ☐ Change ☐ Add
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Add
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

JAN-20-2000 (954) 578-0077

Date

Daytime Phone #