

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2000 8:00 am**  
**Secretary of State**

01-27-2000 90058 048 \*\*\*150.00

**DOCUMENT # P98000060927**

1. Entity Name

**NATURAL SYSTEM INTERNATIONAL, CORP.**

Principal Place of Business

Mailing Address

2598 W. 78TH STREET  
 HIALEAH FL 33016

2598 W. 78TH STREET  
 HIALEAH FL 33016-2773

2. Principal Place of Business

7440 SW SOTERR

3. Mailing Address

7440 SW 50 TERR

Suite, Apt. #, etc.

SUITE 101

Suite, Apt. #, etc.

SUITE 101

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33155

Country

USA

Zip

33155

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0852231

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

RIOS, LEOPOLDO J  
 1800 WEST 49TH ST.  
 SUITE 215  
 HIALEAH FL 33012

7. Name and Address of New Registered Agent

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

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

11. OFFICERS AND DIRECTORS

TITLE PSD  Delete  
 NAME USECHE, JAVIER  
 STREET ADDRESS 10227 NW 9TH ST CIR. #305  
 CITY-ST-ZIP MIAMI FL 33172

TITLE VTD  Delete  
 NAME CEDENO, ROQUE A  
 STREET ADDRESS 10227 N.W. 9TH ST., CIR 305  
 CITY-ST-ZIP MIAMI FL 33172

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  Addition  
 NAME  
 STREET ADDRESS 7440 SW 50 TERR SUITE 101  
 CITY-ST-ZIP MIAMI FL 33155

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS 7440 SW 50 TERR SUITE 101  
 CITY-ST-ZIP MIAMI FL 33155

TITLE  Change  Addition  
 NAME D USECHE GABRIEL  
 STREET ADDRESS 7440 SW 50 TERR ST 101  
 CITY-ST-ZIP MIAMI FL 33155

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 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: **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #