

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90055 009 ***150.00

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DOCUMENT # P98000063621

1. Entity Name

DEVELOPMENT 2000 ENTERPRISE GROUP, INC.

Principal Place of Business

8500 SW 8TH ST
 #240
 MIAMI FL 33144
 US

Mailing Address

8500 SW 8TH ST
 #240
 MIAMI FL 33144
 US

2. Principal Place of Business

10287 NW 135 ST

Suite, Apt. #, etc.

3. Mailing Address

10287 NW 135 ST

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HALEAH GARDENS FL

City & State

HALEAH GARDENS FL

4. FEI Number

65-0930602

Applied For

Not Applicable

Zip

33018

Country

US

Zip

33018

Country

US

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HERNANDEZ, JUAN C
8500 SW 8TH ST
#240
MIAMI FL 33144

7. Name and Address of New Registered Agent

Name: **HERNANDEZ, JUAN CARLOS**
 Street Address (P.O. Box Number is Not Acceptable):
10287 NW 135 ST
 City: **HALEAH GARDENS FL** Zip Code: **33018**

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. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PDS	HERNANDEZ, J.C.	8500 SW 8TH ST	MIAMI FL 33144	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PDS	HERNANDEZ, J.C.	10287 NW 135 ST	HALEAH GARDENS FL 33018	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

Date

Daytime Phone #

04-25-01 (315) 826-2327

CR2E034 (10/00)