

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000071923

1. Entity Name

MEDSTAT MANUFACTURING, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90381 050 ***150.00

Principal Place of Business

407 LINCOLN RD STE 8D
MIAMI BEACH FL 33139

Mailing Address

407 LINCOLN RD STE 8D
MIAMI BEACH FL 33139-3008

2. Principal Place of Business

P.O. Box 402306

3. Mailing Address

Medisa, Inc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

P.O. Box 402306

City & State

Miami Beach, FL

City & State

Miami Beach, FL

Zip

33140

Country

USA

Zip

33140

Country

USA

4. FEI Number

65-0931943

APPLIED FOR

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMARO, JORGE L
407 LINCOLN RD STE 8D
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name: Jorge L. Amaro
Street Address (P.O. Box Number is Not Acceptable): 13210 SW 20th Street
City: Miramar FL Zip Code: 33027

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, 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: P
NAME: AMARO, JORGE L
STREET ADDRESS: 407 LINCOLN RD STE 80
CITY-ST-ZIP: MIAMI BCH FL 33139 ☒ Delete

TITLE: VP
NAME: AMARO, CARLOS L
STREET ADDRESS: 407 LINCOLN RD STE 80
CITY-ST-ZIP: MIAMI BCH FL 33139 ☒ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

TITLE: ☐ Delete
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STREET ADDRESS:
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TITLE: ☐ Delete
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STREET ADDRESS:
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☐ Delete

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: P
NAME: AMARO, JORGE L
STREET ADDRESS: 13210 SW 20TH STREET
CITY-ST-ZIP: MIRAMAR, FL 33027 ☒ Change ☐ Addition

TITLE: VP
NAME: AMARO, CARLOS
STREET ADDRESS: 5401 COLLINS AVE #322
CITY-ST-ZIP: MIAMI BEACH, FL 33140 ☒ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

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

Daytime Phone #

CR2E034 (9/99)