

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000080531

1. Entity Name

SUMINELCA INTERNATIONAL CORPORATION

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90117 030 ***150.00

Principal Place of Business

Mailing Address

19272 N.W. 88TH PLACE
HIALEAH FL 33018

19272 N.W. 88TH PLACE
HIALEAH FL 33018-6246

2. Principal Place of Business

3. Mailing Address

104 Crandon Blvd

104 Crandon Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 421C

Suite 421C

City & State

City & State

Key Biscayne, FL

Key Biscayne, FL

Zip
33149

Country
USA

Zip
33149

Country
USA

4. FEI Number

65-0862134

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

IGLESIAS, ADOLFO E
19272 N.W. 88TH PLACE
HIALEAH FL 33018

Name

MARIO R PARDO

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

104 Crandon Blvd Suite 421C

City

Key Biscayne

FL

Zip Code
33149

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

MARIO R PARDO

4/26/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME DP
STREET ADDRESS PATINO, ALEIDA S
CITY-ST-ZIP 19272 N.W. 88TH PLACE
HIALEAH FL 33018

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

TITLE ☐ Delete
NAME PT
STREET ADDRESS ALEJANDRO VICUNA
CITY-ST-ZIP 104 Crandon Blvd Suite 421C
Key Biscayne, FL 33149

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

TITLE ☐ Delete
NAME VP
STREET ADDRESS MARIO R PARDO
CITY-ST-ZIP 104 Crandon Blvd Suite 421C
Key Biscayne, FL 33149

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

TITLE ☐ Delete
NAME S
STREET ADDRESS RICARDO OLIVARES
CITY-ST-ZIP 104 Crandon Blvd Suite 421C
Key Biscayne, FL 33149

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

Aleida Patino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALEIDA PATINO

4/26/2000

Date

Daytime Phone #

CR2E034 (9/99)