

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087422

1. Entity Name

CYBEX INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

2. Principal Place of Business

8850 S.W. 123 COURT

Suite, Apt. #, etc.

H-306

City & State

MIAMI, FLORIDA

Zip

33186

Country

U.S.A.

3. Mailing Address

8850 S.W. 123 COURT

Suite, Apt. #, etc.

H-306

City & State

MIAMI, FLORIDA

Zip

33186

Country

U.S.A.

6. Name and Address of Current Registered Agent

ALEJANDRO M. REYES

8850 S.W. 123 COURT H-306

MIAMI, FLORIDA 33186

4. FEI Number

65-0871528

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

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

3/3/2000

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	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT & DIRECTOR & TREASURER	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	ALEJANDRO M. REYES		
STREET ADDRESS	8850 S.W. 123 COURT H-306		
CITY-ST-ZIP	MIAMI, FL. 33186		
TITLE	VICE-PRESIDENT & DIRECTOR & SECRETARY	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	VERONICA VOGEL		
STREET ADDRESS	8850 S.W. 123 COURT H-306		
CITY-ST-ZIP	MIAMI, FL. 33186		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> 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 title empowered.

SIGNATURE:

PRESIDENT

3/3/2000

(305) 772-8196

Date

Daytime Phone #

CR2E034 (9/99)