

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093333

1. Entity Name

LEEWARD INTERNATIONAL, INC.

FILED

Apr 04, 2000 8:00 am  
Secretary of State

04-04-2000 90015 045 \*\*\*150.00

Principal Place of Business

Mailing Address

757 SE 17th Street  
Suite 213  
Ft Lauderdale FL 33316

757 SE 17th Street  
Suite 213  
Ft Lauderdale, FL 33316

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

65-0870641

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAEZ, JOVANNI  
757 SE 17th Street  
Suite 213  
Ft Lauderdale FL 33316

Name

Katherine Lewis

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

4611 S. University #198

City

Davie

FL

Zip Code

33328

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PCD  
COSTA, MARIA  
757 SE 17th Street #213.  
Ft Lauderdale FL 33316

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
CHANDLER, JD  
757 SE 17th Street #213  
Ft Lauderdale FL 33316

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SAEZ, JOVANNI  
757 SE 17th Street #213  
Ft Lauderdale FL 33316

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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 #

Jovanni Saez 3/21/2000

CR2E034 (9/99)