2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000097359

Principal Place of Business		Mailing.Address	Mailing Address				
TOWER. PENTHO FL 33133	USE 3602	BRISTOL TOWER. F 2127 BRICKELL AVI MIAMI FL 33129-210					
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, et	c				
City & State		City & State		4. FEI Number 65–0883470			
33129	Country	Zip	Country	5. Certificate of			
6. Nan	ne and Address of Ci	1	7. Name and Ad				

FILED Apr 14, 2000 8:00 am Secretary of State

04-14-2000 90114 032 ***150.00



DO NOT WRITE IN THIS SPACE

City & State			City & State				El Numbo	. <u></u> <u>.</u>			Applied For	
			City & State		4. FEI Number 65-0883470 65-0836544				<u> </u>	Not Applicable		
3312	9 Country	,	Zip	Countr	У	5. C	ertificate o	of Status Desire	d 🗌	\$8.75 Fee Requ	Additional	
<u></u>	6. Name and Add	ess of Current Re	gistered Agent			7. N	ame and	Address of Ne	w Registere	d Agent		
			• •		Name				-		.	
M & V	N AGENTS, INC.			ŀ	Stroot Ad	dropp (DO Bo	y Number	r ie Not Accents	able)			
2101 CORPORATE BLVD.					Street Address (P.O. Box Number is Not Acceptable)							
SUITE	107			Ī								
BOCA RATON FL 33131				-	City Zip Code						- Ode	
					City				_ F			
8. The above r	named entity submits	this statement for th	ne purpose of changing its	registere	d office or r	registered age	ent, or both	h, in the State o	f Florida.			
SIGNATURE _	Signature, typed or printed nar	ne of registered agent and	title if applicable. (NOT	E: Registered	Agent signatur	e required when rei	nstating)		DATE	<u> </u>		
	ration is eligible to sati quirement and elects a on back)		FILE NOW After MAY 1, 20 Make Check Payab	00 Fee v	vill be \$55	0.00		ction Campaigr st Fund Contrib	_		5.00 May Be	
11.		OFFICERS AND DI	RECTORS	12.		ADI	DITIONS/	CHANGES TO	OFFICERS A	ND DIRECT	ORS IN 11	
TITLE	PD		☐ Delete	TITLE						☐ Chan	ige 🔲 Addition	
NAME	MARTIN, LEO			NAME								
	E.E. Billottere traited, billotter				T ADDRESS							
CITY-ST-ZIP	MIAMI FL 33129	· - ,		CITY-:	ST- ZIP	<u> </u>						
TITLE	VTD		☐ Delete	TITLE						Chang	ige	
NAME	MARTIN, GLORIA	ENGLE DOIOTOL	TOWER	NAME							Ì	
STREET ADDRESS CITY-ST-ZIP	2127 BRICKELL A	VENUE, BRISTUL	. IUWER	CITY-:	T ADDRESS							
	MIAMI FL 33129				31-211	Δ5		<u></u>		Chan	nge 🖾 Addition	
TITLE NAME			☐ Delete	TITLE	j	Tescher					de Fra Woomon	
STREET ADDRESS					T ADDRESS	2101 Co	rpora	te Blvd.	, Ste.	107		
CITY-ST-ZIP				CITY-		воса ка	ton,	FL 33431				
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NAME			□ Delete	NAME						<u> </u>	30	
STREET ADDRESS				STREE	T ADDRESS						ì	
CITY-ST-ZIP				CITY-	ST-ZIP						ł	
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NAME				NAME	.							
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CITY-ST-ZIP				CITY-			10.03/5		16 3	- 416 - 41 - 2 - 2	h - 1-6	
13. I hereby ce	ertify that the informat	on supplied with th	is filing does not qualify fo	or the exen	nption state	ed in Section 1	19.07(3)(i	ı), Florida Statut	es. I further d	ertify that the	ne information	

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 arcturate 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

TATO R. TESCHER, ASST. SEC. 9

561-998-7847

Daytime Phone #