2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 8:00 am
Secretary of State
05-24-2001 90498 048 ***150.00

DOCUMENT # P98000099920 ✓

1. Entity Name

MIS COMMUNICATIONS CORP.

Principal Place of Business	Mailing Address
18871 NW 84 COURT #1006 MIAMI FLORIDA 33015 - USA	18871 NW 84 COURT #1006 MIAMI FLORIDA 33015 - USA

D0056999

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
18871 NW 84 COURT	18871 NW 84 COURT
Suite, Apt. #, etc. #1006	Suite, Apt. #, etc. #1006
City & State MIAMI - FLORIDA	City & State MIAMI - FLORIDA
Zip 33015 Country USA	Zip 33015 Country USA

4. FEI Number 650879689 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JOSE VARGAS
18871 NW 84 COURT #1006
MIAMI, FLORIDA 33015

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

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, 2001: 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	PRESIDENT / JOSE VARGAS / 18871 NW 84 COURT # 1006 MIAMI-FL 33015 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY / PATRICIA SORIA / 18871 NW 84 COURT #1006 MIAMI-FL 33015 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (11/00)

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] JOSE VARGAS PRESIDENT 04/27/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #