

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90283 014 ***150.00

DOCUMENT # *P98000102603*

1. Entity Name
Amathila Group Inc

Principal Place of Business Mailing Address
7161 SW 117th Ave *7161 SW 117th Ave*
Miami Fl. 33183 *Miami Fl. 33183*

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number
05-0881527

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

A006741U

DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

HECTOR VAZQUEZ
1800 West 49 St. Ste 213
Hialeah Fl. 33012

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 _____ DATE _____
Signature: Typed or printed name of signatory agent and file # applicants (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirements and elects to do so (See criteria on back)

10. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$350.00
Make Check Payable to Department of State

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>AV</i> <i>Gilberto Urrutia</i> <i>7161 SW 117th Ave</i> <i>Miami Fl. 33183</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(ii), 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 information.

SIGNATURE: _____ DATE: *4/28/00*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR