

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000103538

1. Entity Name

MIDA INTERNATIONAL GROUP, INC.

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90177 024 ***150.00

Principal Place of Business

Mailing Address

5254 N.W. 117TH AVE
CORAL SPRINGS FL 33076-3222

5254 N.W. 117TH AVE
CORAL SPRINGS FL 33076-3222

2. Principal Place of Business

3. Mailing Address

10302 N.W.S.River Dr.
Suite, Apt. #, etc.

10302 N.W.S.River Dr.
Suite, Apt. #, etc.

Bay # 8

Bay # 8

City & State

City & State

Medley, Florida

Medley, Florida

Zip

Country

Zip

Country

33178

U.S.A

33178

U.S.A

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANDER S., CARLOS M
5254 N.W. 117TH AVE
CORAL SPRINGS FL 33076-3222

Name

LANDER S., CARLOS M

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

10302 N.W.S.River Dr. Bay # 8

City

Medley

FL

Zip Code

33178

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

01/31/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS LANDER S., CARLOS M
CITY-ST-ZIP 5254 N.W. 117TH AVE
CORAL SPRINGS FL 33076-3222

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS LANDER S. CARLOS M
CITY-ST-ZIP 10302 N.W.S.River Dr. Bay#8
Medley, FL 33178

TITLE ☐ Delete
NAME D
STREET ADDRESS MINAN, FRANCISCO
CITY-ST-ZIP 5254 N.W. 117TH AVE
CORAL SPRINGS FL 33076-3222

TITLE ☒ Change ☐ Addition
NAME D
STREET ADDRESS MINAN, FRANCISCO
CITY-ST-ZIP 10302 N.W.S.River Dr. Bay#8
Medley, FL 33178

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(305) 888.2122