

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0322733
AV

DOCUMENT # P99000003153

1. Entity Name
ACCOUNTING INTERNATIONAL CORP.



FILED

03 JAN 21 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
10131 SW 154 CIRCLE CT.
107
MIAMI FL 33196

Mailing Address
10131 SW 154 CIRCLE CT.
107
MIAMI FL 33196

2. Principal Place of Business

338 SW 12 AVE

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

65-0888075

Applied For

Not Applicable

Zip

33130

Country

USA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GONZALEZ, MIRIAM E
10131 SW 154 CIRCLE CT.
107
MIAMI FL 33196

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVPD
NAME GONZALEZ, MIRIAM
STREET ADDRESS 10131 SW 154 CIRCLE CT., #107
CITY-ST-ZIP MIAMI FL 33196 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME GONZALEZ, MIRIAM E
STREET ADDRESS 10131 SW 154 CIRCLE CT #107
CITY-ST-ZIP MIAMI FL 33196 ☒ Change ☐ Addition

TITLE UPS
NAME GONZALEZ, RAMON A.
STREET ADDRESS 10131 SW 154 CIRCLE CT #107
CITY-ST-ZIP MIAMI FL 33196 ☐ Change ☒ Addition

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Cecilia E. Schepers
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/03
Date

261-8761
Daytime Phone #

CR2E034 (10/02)