# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Feb 21, 2002 8:00 am**
**Secretary of State**
02-21-2002 90059 006 ***150.00

DOCUMENT # P99000004233

1. Entity Name
Debanet International, Inc.

**DO NOT WRITE IN THIS SPACE**

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 7951 SW 40th St. | 7951 SW 40th St. |
| Suite Apt. #, etc. 206 | Suite Apt. #, etc. 206 |
| City & State Miami, FL | City & State Miami, FL |
| Zip 33155 Country US. | Zip 33155 Country US. |

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0889566 ☐ Applied For ☐ Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Deborah T. Ribera

Street Address (P.O. Box Number is Not Acceptable)
7951 SW 40th St. Suite 206

City Miami FL Zip Code 33155

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] (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) ☒

**January 1 - May 1 Fee is $150.00**
**After May 1, Fee is $550.00**
**Amended UBR is $61.25**
**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

| | |
|---|---|
| TITLE | PD |
| NAME | Deborah T. Ribera |
| STREET ADDRESS | 7951 SW 40th St. Suite 206 |
| CITY-ST-ZIP | Miami, FL 33155 |
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**DO NOT WRITE IN THIS SPACE**

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 02-11-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #