

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90327 011 ***150.00

0155883

DOCUMENT # P99000009338

1. Entity Name

INTERNATIONAL TRAINING RESOURCES, INC.

Principal Place of Business

100 NORTH BISCAYNE BOULEVARD
NEW WORLD TOWER - 21ST FLOOR
MIAMI FL 33132

Mailing Address

100 NORTH BISCAYNE BOULEVARD
NEW WORLD TOWER - 21ST FLOOR
MIAMI FL 33132

2. Principal Place of Business

7700 N. Kendall Dr.

3. Mailing Address

7700 N. Kendall Dr.

Suite, Apt. #, etc.

Suite 809

Suite, Apt. #, etc.

Suite 809

City & State

Miami FL

City & State

Miami FL

Zip

33156

Country

USA

Zip

33156

Country

USA

4. FEI Number

65-0891191

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WOODBIDGE, FREDERICK JR.
100 NORTH BISCAYNE BOULEVARD
NEW WORLD TOWER - 21ST FLOOR
MIAMI FL 33132

7. Name and Address of New Registered Agent

Name

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

7700 N. Kendall Dr.
Suite 809

City

Miami

FL

Zip Code

33156

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

TITLE	D	<input type="checkbox"/> Delete
NAME	CAICEDO-ESTELA, PILAR	
STREET ADDRESS	AVENIDA 5 OESTE NO. 2-83	
CITY-ST-ZIP	CALI, COLOMBIA	
TITLE	D	<input type="checkbox"/> Delete
NAME	ENGEL, JOSE M	
STREET ADDRESS	AVENIDA 5 OESTE NO. 2-83	
CITY-ST-ZIP	CALI, COLOMBIA	
TITLE	D	<input type="checkbox"/> Delete
NAME	CAICEDO-ESTELA, MARIA V	
STREET ADDRESS	798 CRANDON BLVD. #54	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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:

U. Caicedo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/2001

Date

305-220-3145

Daytime Phone #

CR2E034 (10/00)