2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State
07-24-2001 90026 010 ***150.00

DOCUMENT # P99000010668

1. Entity Name
INTELLIVEST, Inc.

Principal Place of Business / Mailing Address
~~14831 S.W. 80 ST. #203~~
~~Miami, FL 33193~~

D0059392

2. Principal Place of Business	3. Mailing Address
14693 SW 142 PL Cir.	14693 SW 142 PL Cir.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State: Miami, FL
Zip: 33186 Country: USA	Zip: 33186 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0891660 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

Reyes, Miguel A.
~~14831 SW 80 ST #203~~
~~Miami, FL 33193~~

7. Name and Address of New Registered Agent

Name: Reyes, Miguel A.
Street Address (P.O. Box Number is Not Acceptable): 14693 SW 142 PL Cir.
City: Miami FL Zip Code: 33186

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 _____ 7-18-2001
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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P Reyes, Miguel A. ~~14831 SW 80 ST #203~~ ~~Miami, FL 33193~~	☐ Delete	D/P Reyes, Miguel A. 14693 SW 142 PL Cir. Miami, FL 33186	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2ED34 (11/00)

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: _____ 7-18-2001 (305) 528-4010