2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000016771

FILED
00 MAR 23 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name: 3065 Co.

Principal Place of Business	Mailing Address
13941 S.W. 52 Terrace Miami, Florida 33175	13941 S.W. 52 Terrace Miami, Florida 33175

2. Principal Place of Business	3. Mailing Address
1301 N.E. 191 Street	1301 N.E. 191 Street
Suite, Apt. #, etc.: #F 401	Suite, Apt. #, etc.: #F 401
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33179 / Country: USA	Zip: 33179 / Country: USA

3/03/00 902451050 $150.00
DO NOT WRITE IN THIS SPACE

4. FEI Number: Applied For / X Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Baruch Spivak 13941 S.W. 52 Terrace Miami, Florida 33175	Name: Street Address (P.O. Box Number is Not Acceptable): 1301 N.E. 191 Street #F 401 City: Miami FL Zip Code: 33179

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

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: President NAME: Baruch Spivak STREET ADDRESS: 13941 S.W. 52 Terrace CITY-ST-ZIP: Miami, Florida 33175 ☐ Delete	TITLE: President NAME: Baruch Spivak STREET ADDRESS: 1301 N.E. 191 St. #F 401 CITY-ST-ZIP: Miami, Fl. 33179 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition
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CR2E034 (9/99)

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: Baruch Spivak Baruch Spivak. 2-22-00 305-948-8700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #