FILED

## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Sep 30, 2002 8:00 am Secretary of State DOCUMENT # P99000025531 1. Entity Name 09-30-2002 90178 029 \*\*\*150.00 FLASH INDUSTRIES OF MIAMI, INC. Principal Place of Business Mailing Address 85 GRAND CANAL DR 85 GRAND CANAL DR **MIAMI FL 33144** MIAMI FL 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0904953 Not Applicable Zip Country Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CAMPANA, NICOLAS Street Address (P.O. Box Number is Not Acceptable) 85 GRAND CANAL DR SUITE 104 **MIAMI FL 33144** City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME CAMPANA, NICOLAS NAME STREET ADDRESS 10250 SW 56TH ST, B-102 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33165 CITY-ST-ZIP TITLE VSD ☐ Delete TITLE ☐ Change ☐ Addition NAME CAMPANA, MARIA NAME STREET ADDRESS 10250 SW 56TH ST, B-102 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33165 TITLE ☐ Delete TITLE Change ☐ Addition NAME. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE There ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE \_\_\_ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

attachment

010422

FLASH INDUSTRIES OF MIAMI, INC

85 GRAND CANAL DR S-104 MIAMI,FL 33144 (305) 261-1614

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

**RE: UNIFORM BUSINESS REPORT 2002** 

This letter is writing to notify you, that this is the first time notice I receive, my corporation did not receive the prior notice. I'm sending \$150.00 filing fee.

Thank you, for your attention.

Sincerely

Nicolas Campana, PTD